

Child's Play Learning Center

"Quality childcare in a home-like setting"

11795 Pickerington Rd.

Pickerington, OH 43147

(614)833-1836 Fax (614)833-1837

Email: childsplaylearning@gmail.com

Website: childsplaylearningcenter.com



ENROLLMENT PACKET

Owner:

Barbara Velez Barbosa

Director:

Karen Cox

Co-Administrators:

Genie Epp & Lindsay Carson

**CHILD'S PLAY LEARNING CENTER, INC.
11795 PICKERINGTON RD.
PICKERINGTON, OH 43147**

**TUITION RATES EFFECTIVE
January 30th, 2015**

	WEEKLY (4 days or more)	DAILY
INFANT - 6 weeks to 18 months	\$230	\$65
TODDLER - 18 months to 3 years & potty trained	\$210	\$60
PRESCHOOL - 3 to 5 & potty trained- <u>not in</u> school	\$190	\$55
KINDERGARTEN - 5 years/Older & <u>in</u> school	\$160	\$45

	MONTHLY RATES	
AM PRESCHOOL – 3 to 5 & potty trained ***9 am – 11:30 am***	(2 days a week)	(3 days a week)
	\$145	\$165
	(4 days a week)	(5 days a week)
	\$190	\$220

	BEFORE OR AFTER	BEFORE & AFTER	FULL WEEK
SCHOOLAGE - Weekly	\$ 90.00	\$105.00	\$160.00
Daily	\$25.00	\$30.00	

****ADDITIONAL COST:** Never to exceed \$160.00 in weekly tuition excluding transportation & field trip fees

NO SCHOOL DAYS	\$ 30.00 PER DAY
DROP IN	\$ 54.00 PER DAY
DELAYS	\$ 10.00 PER HOUR
TRANSPORTATION	\$ 1.50 PER WAY
SUMMER DAILY RATE	\$45.00 PER DAY

*****PLEASE KEEP IN MIND THAT FIELD TRIP COSTS ARE EXTRA AND NOTIFIED IN ADVANCE.**

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CENTER CLOSINGS FOR 2015

APRIL 3, 2015—GOOD FRIDAY—CENTER CLOSED @ 4:00 P.M.

MAY 25, 2015—MEMORIAL DAY—CENTER CLOSED

JULY 3, 2015—INDEPENDENCE DAY—CENTER CLOSED

SEPTEMBER 7, 2015—LABOR DAY—CENTER CLOSED

NOVEMBER 26 & 27, 2015—THANKSGIVING—CENTER
CLOSED

DECEMBER 24 & 25, 2015—CHRISTMAS EVE & CHRISTMAS
DAY—CENTER CLOSED

DECEMBER 31, 2015 & JANUARY 1, 2016—NEW YEAR'S EVE &
NEW YEAR'S DAY—CENTER CLOSED

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2015 Pay Schedule:

Monthly payments are due before 10 A.M. the last Friday of each month. Please see due dates below as well as if the payment being made should be for 4 weeks or 5 weeks:

Jan. 30 – 4 week payment	July 31 – 4 week payment
Feb. 27 – 4 week payment	Aug. 28 – 4 week payment
Mar. 27 – 4 week payment	Sept. 25 – 5 week payment
Apr. 24 – 5 week payment	Oct. 30 – 4 week payment
May 29 – 4 week payment	Nov. 27 – 4 week payment (Pay on 11/25/15)
June 26 – 5 week payment	Dec. 25 – 5 week payment (Pay on 12/23/15)

Bi-Weekly payments are due on the following Fridays by 10 A.M.:

January 2, 16, & 30	July 3 (Pay on 7/2/15), 17, & 31
February 13 & 27	August 14 & 28
March 13 & 27	September 11 & 25
April 10 & 24	October 9 & 23
May 8 & 22	November 6 & 20
June 5 & 19	December 4, 18, & 1/1/16 (Pay on 12/30/15 due to holiday)

* Please remember transportation (\$1.50 per way), days off (\$30.00 per day), and early dismissals or delays (\$ 10.00 per hour) for school age children need to be added when applicable. Discounts do not apply to these extra charges.

If your account is paid later than 10 A.M. on Friday, please add a \$35.00 late fee. You will receive notice if payment is late!

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A \$60.00 Registration fee for each child, or
\$100.00 for two children or more, is due with this application.
This is a Non-Refundable Fee, Applicable Yearly by March 15th

Child's Last Name	First	Middle	Birthdate
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's name	Father's name	Marital Status	Mother
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Address	Phone Number
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City	State	Zip Code
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Mother's Employer	Address
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Work Phone Number	Work Hours	Occupation
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Father's Employer	Address
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Work Phone Number	Work Hours	Occupation
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Members of Household and Their Relationship:

Has the child previously attended a Child Care Center? If yes, where and how long?

AMOUNT PAID _____ CHECK # _____ DATE PAID _____

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CHILD SAFETY FORM

ROUTINE TRIP AUTHORIZATION

I give my permission for _____ to accompany teachers or staff of CHILD'S PLAY LEARNING CENTER, INC. on routine field trips in and around the vicinity of the center.

Parent's or Guardian's Signature

Date

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RELEASE FORM

I release Child's Play Learning Center, its teachers, volunteers, and all other persons connected with the Program from liability claims of any kind resulting from accidental injuries that might be sustained by my child _____ while on routine trips and on the premises.

Parent's or Guardian's Signature

Date

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PERMISSION TO PARTICIPATE

I give my permission for _____ to use all of the play equipment and to be included in all activities, evaluations and pictures connected with Child's Play Learning Center's programs.

Parent's or Guardian's Signature

Date

I give permission for Child's Play Learning Center to post pictures of my child _____ on their website, www.childsplaylearningcenter.com. I understand that at no time will my child's name or age be revealed with their picture. I also understand that Child's Play Learning Center will let me know whenever a picture of my child is going to be used on the center website so I can view it.

Parent's or Guardian's Signature

Date

