



RODGERS FORGE CHILDREN'S CENTER

© 56 Stevenson Lane ♦ Baltimore, MD 21212 ♦ (410) 377-5142
Website: towsundaycare.com ♦ Email: rfcc56@comcast.com

Registration Contract

Child Information

First Name: _____ M.I. _____ Last Name: _____ Age: _____

Name child prefers to be called: _____ Birth Date: _____ SS#: _____

Address: _____ City: _____ Zip Code: _____

Please list any existing medical conditions, medication and /or special attention your child may require:

Allergies: _____

Parent/Guardian Information _____ Registration Date _____

Mother/Guardian

First Name: _____ M.I. _____ Last Name: _____

Address: _____ City: _____ Zip Code: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Occupation: _____ Employed By: _____

Work Address: _____ City: _____ Zip Code: _____

Custodial Parent (if married, mark both parents)

Email: _____ Driver's License/ID #: _____

Father/Guardian

First Name: _____ M.I. _____ Last Name: _____

Address: _____ City: _____ Zip Code: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Occupation: _____ Employed By: _____

Work Address: _____ City: _____ Zip Code: _____

Custodial Parent (if married, mark both parents)

Email: _____ Driver's License/ID #: _____

Tuition/Fees and Payment Information

I agree to pay the Rodgers Forge UMC Children's Center the required fees as follows:

Registration Fee: \$ _____. This fee is nonrefundable. It will hold my child's place in the center until the agreed upon start date.

Security Deposit: \$ _____. One week's tuition. It is due on or before my child's first day and refundable only when I give a two-week written notice that my child will be withdrawn from the center.

Parent initials: _____

We offer a 10% sibling discount.

over

Full Time Tuition: \$ _____ a week for my five day a week child. It is due in advance. It is to be paid each Friday for the following week. Multiple weeks may be paid in advance. I understand that if my tuition falls more than two weeks behind, I must remove my child from the center until my balance is paid in full. I understand that I may have to be placed on a wait list if the center is at capacity. _____

Parent initials

Part Time Tuition: \$ _____ a day for my child. It is due in advance. It is to be paid each Friday for the following week. Multiple weeks may be paid in advance. I understand that if my tuition falls more than two weeks behind, I must remove my child from the center until my balance is paid in full. I understand that I may have to be placed on a wait list if the center is at capacity. _____

Parent initials

Before and After School: \$ _____ a week or _____ a day. It is due in advance. It is to be paid each Friday for the following week. Multiple weeks may be paid in advance. An additional \$10 daily fee will be charged when the elementary school is closed due to holidays, snow days, professional days, etc. and the center is open and your child is present. I understand that if my tuition falls more than two weeks behind, I must remove my child from the center until my balance is paid in full. I understand that I may have to be placed on a wait list if the center is at capacity.

Parent initials

*I understand that finance charges and a late fee of 10% of my tuition balance will be charged to my account on Tuesday if my tuition is not paid by Monday. _____

Parent initials

*I must pay for holidays, absences, and snow days that occur on my child's scheduled days. _____

Parent initials

*In case of default, I agree to pay all cost of collection including collection agency fees, a three stage administrative fees, attorney fees and court costs. _____

Parent initials

*RFCC closes at 6:00 p.m. The late pick up fee of \$1 is due for each minute after closing that you are late picking up your child. It must be paid at the time of pick up to the teacher who has stayed late with your child. _____

Parent initials

*Returned checks are subject to a \$40 returned check charge.

*I would like my child to start on _____ in the _____ class.
date _____ age _____

Monday

Tuesday

Wednesday

Thursday

Friday

*I agree to follow the Parent Handbook of rules and policies of RFCC. _____

Parent initials

Parent Signature

Date

*Where did you hear about us? _____