



CSS OST Program

www.cssoutofschooltime.org

TUITION AGREEMENT

Year: _____ Summer/School Year

Date of Enrollment: _____

*In case of emergency, I give permission for my child(ren) to be released to the people named on the emergency contact on file **and those listed below**. (Print name, relationship, and phone #)

1. _____

2. _____

I would like to enroll my child(ren) _____ in CSS St. Malachy's OST program.

Hours of operation Monday-Friday 3:00-6:00 p.m. (School Year); 8:00 am-6:00 pm (Summer Camp)

My Child's weekly schedule will be:

Monday	_____ 3:00pm	to	_____ 6:00pm
Tuesday	_____ 3:00pm	to	_____ 6:00pm
Wednesday	_____ 3:00pm	to	_____ 6:00pm
Thursday	_____ 3:00pm	to	_____ 6:00pm
Friday	_____ 3:00pm	to	_____ 6:00pm

My child(ren) will attend full day yes/no
My child(ren) will attend half days yes/no

Payment of fees:

I agree to pay (on Monday or Friday of each week that my child attends) the sum of \$ _____

Tuition Rates/Fees:

School Year: \$307.00 weekly, per child

Summer Camp: \$307.00 weekly, per child

Note Scholarships are available.

Should the fee become delinquent by two or more weeks, a communication will be sent to remind parents to pay all back fees immediately. Parents unable to pay weekly fee MUST talk to the OST Director to come up with an alternative payment plan and schedule. Failure to do this may lead to the withdrawal of my child until the entire overdue balance is paid in full or an alternative payment plan and schedule is agreed upon. I also understand that my child position will not be reserved in the group and will be unable to register for fall or summer enrollment unless balances are paid.

1. Cash Payment

I understand that St. Malachy's OST will not be held responsible for cash payment made without a receipt.

2. Registration Fee

I understand that there is a non refundable registration fee, which is paid at the time of enrollment. I understand that a registration fee is due for each school year and each summer camp, per child. If I withdraw my child(ren) for any reason, it will be necessary to re-register and pay the registration fee again.

3. Late Pick Up Charges

I understand that if my child remains at the center past the designated closing time, I will be charged and agree to pay \$10.00 for every fifteen minutes. (i.e. 6:01 -6:15 charged \$10.00 etc.). I also understand that local authorities will be contacted if my child is left at the center after 6:45pm.

4. Returned Check Policy

I understand and agree to pay a \$10.00 processing fee for each check returned from the bank. I agree to pay the full amount of the returned check including the return check fee within 5 days of notice.

5. Daily Attendance

I understand that my child is to attend a minimum of 4 days a week for at least 90 minutes per day as per our contract with Philadelphia Health Management Corporation and the City of Philadelphia. Summer Camp children are to attend 4 days a week for a minimum of 4 hours a day.

6. Services Provided

Care is provided for children in grades Kinder thru 5th Grade. Afternoon snack is provided during the school and summer programming. Breakfast and lunch are provided during summer programming only.

7. Holidays & Holydays (subject to change)

I understand that the St. Malachy's Out of School Time Program (OST) will be closed on the following Holidays and Holydays:

- | | |
|------------------------|--|
| Labor Day | Martin Luther King Day |
| All Saints Day | Holy Thursday |
| Thanksgiving Day | Good Friday |
| Day After Thanksgiving | Memorial Day |
| Immaculate Conception | Ascension Thursday |
| Christmas Eve | Feast of the Assumption |
| Christmas Day | 1 week before and 1 week after summer camp (Dates/week vary) |
| Winter Break Week | |
| New Year's Eve | |
| New Year's Day | |

**I understand that all tuition is structured for holiday/holydays and I will not be entitled to any credit on my weekly fee. The full fee is charged and due if my child attends 1 day that week or the whole week. I also understand that additional fees will be given for full day and half days of programming.

8. Refund and Absentee Policy

I understand that NO REFUNDS will be made for days missed due to child illness and or vacations. I also understand that there will be no refunds for days that would cause the St. Malachy's OST Program to close including school closures due to snow or inclement weather, or any school holidays. The full weekly fee is due for each week the child attends.

9. Withdraw

I understand to give at least 2 weeks written notice prior to my child(ren) withdrawing from the program. If your child is not in attendance for 2 consecutive weeks without notification, program staff will consider them withdrawn from the program and their spot will be filled.

10. Dismissal understand that my child(ren) may be asked to leave the OST program if they have had 3 written warnings.

11. Hold Harmless

It is agreed that Catholic Social Services St. Malachy's OST Program will not be responsible for any adverse occurrences that should arise by you employing a Catholic Social Service OST staff member for personal service i.e. babysitting. Should a request for a staff member to transport my child(ren) by walking them to and from the center, I understand that Catholic Social Services is not responsible for accidents or injuries that may occur. Catholic Social Services OST employees are not, under any circumstances, allowed to transport children by any form of vehicle even at the parents/guardians request. Catholic Social Services will not be responsible or held liable for items brought from home that are lost, stolen or damaged. Parents/guardians are urged not to send valuables, money, jewelry, hand held devices, cell phones, or toys, etc. to the program with the children.

12. Release of Child

I understand that my child will not be released to an authorized pick up or myself should the center staff suspect this person to be under the influence of drugs or alcohol. I further understand that my child must be in a proper seat restraint appropriate for his/her age and weight. I further understand that without a court order my child may be released to the parent/guardian listed on the child(ren)'s emergency contact form.

13. Return of Required Forms

It is agreed that I will return all required forms (i.e. medical forms) upon registration or at the times when they are due or I may be asked to keep my child at home until all required forms are submitted. I also agree to keep my child's health assessment current as well as updating my child's emergency contact form every 6 months.

14. Pick Up of Children from School/Bus

I agree to allow the employees of the Catholic Social Services OST program to pick my child up after school daily and/or from the bus stop. I agree to call and inform the OST staff if my child(ren) will be absent that day.

15. Children's Belongings

I agree that Catholic Social Services OST is not responsible for my child's belongings.

16. Subsidized Care CCIS

I agree to pay my co-pay to Catholic Social Services OST program each week. If I fail to do so I understand that it is a breach in contract and I will be reported to the agency supplying the subsidy and adverse action will take place.

17. Should I disagree with these policies of the OST Program and or the director and create a hostile environment, I will be told that my affiliation with Catholic Social Services OST Program has been terminated and will leave the premises immediately.

18. I understand that this parent/tuition agreement is subject to change. I understand that the OST Program will give written notice within 2 weeks of any changes.

19. I understand that all policies and procedures are explained in the parent handbook received upon registration.

Parent's Signature: _____ Date: _____

Director's Signature: _____ Date: _____

Tuition Agreement Continued

6 month review

Parent's Signature: _____ Date: _____

Director's Signature: _____ Date: _____

** A new agreement is due at the time of each registration summer and school year.
Periodic review is every 6 months.

*** Parents keep original; copy goes in child (ren)'s file.