



# ENROLLMENT AGREEMENT

## FALL / SPRING 2024 / 2025

PO BOX 590 | RED LODGE MT 59068

Welcome! We're honored to become a part of your child's early learning experiences. This enrollment agreement collects the information we need to ensure that we all have the best start possible. We use this information to complete your enrollment, assign your child to the appropriate classroom or program, communicate with you, and comply with childcare licensing regulations.

### Effective Dates

This contract is valid for services provided beginning **September 1, 2024 through May 31, 2025**. Any changes or termination to this agreement requires a 30-day written notice prior to the first of the month. This contract may be terminated by either the Beartooth Children's Center or the parent/guardian.

### CHILD'S INFORMATION

Full Legal Name: \_\_\_\_\_ Nick Name: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Current Age: \_\_\_\_\_  Male  Female

### PARENT / GUARDIAN INFORMATION

Full Name: \_\_\_\_\_ Relationship to Child: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Primary Phone: \_\_\_\_\_ Secondary Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Name of Employer: \_\_\_\_\_

### ADDITIONAL PARENT / GUARDIAN INFORMATION (IF NEEDED)

Full Name: \_\_\_\_\_ Relationship to Child: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Primary Phone: \_\_\_\_\_ Secondary Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Name of Employer: \_\_\_\_\_

### CENTER HOURS

The Center is open from 7:30am to 5:30pm, Monday through Friday. The Center is closed on the following holidays:

- New Year's Day
- 1 day for Easter
- Memorial Day
- Independence Day

- Labor Day
- Thanksgiving Day and the day after Thanksgiving
- Christmas Day, plus one additional day

The Center is also closed for professional development for staff every year, typically one to two days. Tuition is not reduced as a result of center closures. The Center reserves the right to close on other occasions with a minimum of 2 weeks' notice.





# ENROLLMENT AGREEMENT SUMMER 2024

Daily Rates*	Full Day:	\$45.00 2yrs- PreK	\$57.00 12-24 months
	Half Day:	\$26.00 2yrs- PreK	\$31.00 12-24 months
	<i>*For enrolled families adding a day</i>		
Late Pick-Up Fee*	1-15 minutes:	\$15.00	
	16-30 minutes:	\$30.00	
	<i>*This fee is the responsibility of the parent/guardian. Financial assistance does not cover this fee.</i>		
Additional Fees	Your child may have the opportunity to participate in special programs or field trips with an additional fee.		

Monthly Tuition Estimator	Number of Days Per Week	Full Days		Half Days	
	5	\$945.00 \$1,197.00	2yrs-PreK 12-24 months	\$546.00 \$651.00	2yrs-PreK 12-24 months
4	\$765.00 \$969.00	2yrs-PreK 12-24 months	\$442.00 \$527.00	2yrs-PreK 12-24 months	
3	\$585.00 \$741.00	2yrs-PreK 12-24 months	\$338.00 \$403.00	2yrs-PreK 12-24 months	
2	\$405.00 \$513.00	2yrs-PreK 12-24 months	\$234.00 \$279.00	2yrs-PreK 12-24 months	

## BILLING

Statements are sent out on a monthly basis and payment in full is due on the 1<sup>st</sup> of the month. If your account is not paid in full by the 15<sup>th</sup> of the month a \$50.00 late fee will be added to your account balance. Services will be discontinued on the first of the following month unless payment arrangements have been made.

## HRDC Families

You are responsible for your bill. HRDC's reimbursement rate may not cover your bill in its entirety. Any overages and/or HRCD monthly required copays are your responsibility and are due on the first of each month. All families are billed for *enrolled reserved time*. HRDC will only pay for days actually attended; families are responsible to pay for any differences.



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## ACKNOWLEDGEMENTS

1. **Regular Schedule Tuition** is based on the child’s regular schedule. I will be charged additional tuition if my child’s attendance increases beyond this schedule. If my child’s schedule changes in any way, I will notify the center immediately. Tuition and fees are not pro-rated for illness, holidays, or emergency closures. I agree to pay the full tuition even if my child is absent for one or more days.
2. **Absences** I will notify the center by 9:00am when my child will be absent.
3. **Child Not Picked Up** If I fail to pick up my child and/or contact the center, and I or another authorized person cannot be reached within 15 minutes after closing time, center staff may release my child to the custody of child protective services or other local authorities.
4. **Late Payment Fee** All tuition is due in advance of services rendered. If tuition is not paid in advance, a late fee of \$50.00 will be charged.
5. **Late Pick-Up Fee** A late pick-up fee will be assessed when a child is left beyond the Center’s operating hours. The late pick-up fee does not constitute an agreement to provide after hours service.
6. **Financial Obligations** As the parent/guardian signing this Enrollment Agreement all amounts due are ultimately my responsibility. Accounts two weeks in arrears may result in immediate termination of services; however, upon payment, enrollment may be reinstated with applicable paid tuition and applicable late payment fees. Overdue accounts may be referred to a collection agency. Payments from families with prior unpaid returned checks must be in the form of a money order or cashier’s check. Families with returned check activity may be subject to immediate termination of services.

This agreement is between the Beartooth Children’s Center, under ownership of Memorial Hospital Association (dba Beartooth Billings Clinic), and the parent(s)/guardian(s) of the enrolled child named within this contract.

I have read, understand, and accept the terms in this Agreement, as well as the Beartooth Children’s Center Parent Handbook. I will promptly update any information provided for in this Agreement if any information changes. The Center management does not have the authority to change the terms of this Agreement (other than inserting information where required) either verbally or in writing. A child may be dis-enrolled by the Center without prior notice if, in the sole opinion of the Center, it is in the best interest of the child or the Center. We reserve the right to alter policies and/or program at any time. The terms of this Agreement, including the tuition and fees, are subject to change in whole or in part by the center with 30 days’ notice.

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Parent / Guardian Signature

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Date

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Additional Parent / Guardian if applicable

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Date

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Beartooth Children’s Center Director Signature

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Date