

Tyrone Elementary School
601 Clay Avenue
Tyrone, Pennsylvania 16686
814-684-1342, Fax: 814-684-2149
www.tyrone.k12.pa.us



Kristin Musselman, Principal
Amanda Kurtz, Assistant Principal
Mike McKee, Dean of Students
Jessica Anderson, Special Education Coordinator

**Tyrone Area School District Children's Center
Daycare Payment Contract 2019-2020 School Year**

Grade (2019-20): _____ TAES Teacher (2019-20): _____ Child Start Date: Tuesday, August 27, 2019

Child's Name: _____ Age: _____ DOB: _____

Phone Number: (_____) _____ Cell Phone Number: (_____) _____

Address: _____

Child's Arrival Time (**must be accurate**): _____ Child's Departure Time (**must be accurate**): _____

Parent's (Guardians) Name: _____ Email: _____

Person(s) Designated by Parents to Whom Child May be Released: _____

Does your family receive CCIS subsidized funding? Yes No Does your child have an IEP or ISFP? Yes No

If yes (IEP), please sign here for permission for us to obtain a copy for daycare staff _____

Preschool Parents Only: I'm anticipating my child attending AM PM FULL DAY preschool next year. Complete the next section based on this assumption.

PAYMENT CONTRACT

Full Time Rate of Pay Chart (For the 178 Days School is in session in the 2019-2020 school year)

Check Here	Age	Description	Weekly Rate	# Payments	Payment Formula (178 School Days+15 Paid Holidays)/40 Equal Payments
	Infant	M-F Infant Care	\$ 144.75	40	$178+15=(193*\$30)/40$
	Toddler	M-F Toddler Care	\$ 139.93	40	$178+15=(193*\$29)/40$
	Preschool	M-F Preschool Daycare (Child does not attend K3/K4)	\$ 125.45	40	$178+15=(193*26)/40$
	Preschool	AM (8:10-11:45) or PM 11:10-2:45)	\$ 48.25	40	$178+15=(193*10)/40$
	PreK/School Age	Before School Care (Arrival Time-8:10)	\$ 33.78	40	$178+15=(193*7)/40$
	PreK/School Age	After School Care (2:45-Departure Time)	\$ 38.60	40	$178+15=(193*8)/40$

Part Time Rate of Pay Chart-Infant/Toddlers Only (For the days school is in session in the 2019-2020 school year)

Check Here	Day of Week	Description	Infant Weekly Rate	Toddler Weekly Rate	# Payments	Payment Formula (# school days that fall on that day of the week+3 Paid Holidays)/40 Equal Payments
	Mon	Monday Care August 23, 2018-May 30, 2019	\$24.75	\$23.93	40	$30+3=(33*(\$30 \text{ or } \$29))/40$
	Tues	Tuesday Care August 23, 2018-May 30, 2019	\$30.75	\$29.73	40	$38+3(41*(\$30 \text{ or } \$29))/40$
	Wed	Wednesday Care August 23, 2018-May 30, 2019	\$30.75	\$29.73	40	$38+3(41*(\$30 \text{ or } \$29))/40$
	Thurs	Thursday Care August 23, 2018-May 30, 2019	\$31.50	\$30.45	40	$39+3(42*(\$30 \text{ or } \$29))/40$
	Fri	Friday Care August 23, 2018-May 30, 2019	\$27.00	\$26.10	40	$33+3(36*(\$30 \text{ or } \$29))/40$

Weekly Payment amount (total all checked):

Optional Sign Up Days (subject to change)

The following days are optional sign up days. Information to sign up will be posted approximately two weeks prior to day.
Friday, September 20, 2019; Wednesday, November 27, 2019; Monday, December 23, 2019; Thursday, December 26, 2019; Friday, December 27, 2019;
Monday, December 30, 2019; Friday, February 14, 2020; Friday, March 13, 2020; Monday, March 16, 2020.

RATES: Infant \$30.00 Toddler: \$29.00 Preschool/School Age: \$26.00

PAYMENT/CONTRACT AGREEMENT POLICY

INITIALS	POLICIES
	I UNDERSTAND THAT IF A QUESTION OF THE CUSTODY OF A CHILD ARISES A COURT ORDER MUST BE ON FILE IN THE OFFICE, OR BOTH BIOLOGICAL PARENTS HAVE EQUAL RIGHTS TO THE CHILD.
	I UNDERSTAND NO REFUNDS WILL BE ISSUED.
	I UNDERSTAND THAT THE CHILDCARE PROGRAM EXPECTS THAT IF YOU ARE LATE PICKING UP YOUR CHILD FROM CARE YOU WILL BE REQUIRED TO SIGN A LATE PICK UP FORM AND A LATE FEE WILL BE ASSESSED AS OUTLINED IN THE DAYCARE HANDBOOK.
	THE FIRST PAYMENT FOR 2019-2020 IS DUE FRIDAY, AUGUST 23, 2019. AT MINIMUM, EACH FRIDAY I MUST PAY FOR THE UPCOMING WEEK OF TUITION. LATE FEES WILL BE ADDED TO ACCOUNTS THAT DO NOT FOLLOW THIS POLICY.
	I UNDERSTAND THAT THE TAES DAYCARE DOES NOT CARRY ACCIDENT INSURANCE ON ITS PROGRAM PARTICIPANTS. ALL EXPENSES INCURRED IN THE TREATMENT OF INJURIES WILL BE THE RESPONSIBILITY OF THE PARTICIPANTS OR HIS/HER HEALTH INSURANCE CARRIER.
	I AGREE TO UPDATE THE EMERGENCY CONTACT PARENT CONSENT FORM WHEN CHANGES OCCUR AND AT MINIMUM EVERY 6 MONTHS.
	I RECEIVED, OR HAVE ACCESS TO, THE DAYCARE HANDBOOK (ONLINE).
	I UNDERSTAND THAT AT ANY TIME FOR ANY REASON THE TAES DAYCARE RESERVES THE RIGHT TO UN-ENROLL YOUR CHILD FROM THE PROGRAM. REASONS FOR THAT OCCURRING INCLUDE, BUT ARE NOT LIMITED TO: FAILURE TO MAKE TUITION PAYMENTS, FAILURE TO COMPLY WITH ANY POLICIES IN PLACE, STUDENT BEHAVIOR, ETC.
	I UNDERSTAND I MUST PAY THE WEEKLY PAYMENT FOR THE 40 WEEKS OF THE 2019-2020 SCHOOL YEAR REGARDLESS OF WHETHER THE CHILD IS PRESENT EACH DAY OR NOT.
	REGISTRATION FEE: A ONE-TIME REGISTRATION FEE OF \$50.00 WILL BE APPLIED TO YOUR DAYCARE ACCOUNT FOR BRAND NEW ENROLLMENTS. CHILDREN THAT ALREADY ATTEND THE DAYCARE WILL NOT BE CHARGED THIS FEE. THIS FEE IS NONREFUNDABLE.
	DAILY DAYCARE RATES ON THIS PAYMENT AGREEMENT ARE SUBJECT TO CHANGE. SHOULD RATES INCREASE, A NEW PAYMENT AGREEMENT WILL BE ISSUED FOR FAMILIES TO SIGN.

I HAVE READ, INITIALED, AND AGREE TO ALL OF THE POLICES DISCUSSED IN THE ABOVE TABLE.

x _____
 Parent / Guardian Signature Date

TO BE COMPLETED BY DAYCARE REPRESENTATIVE

Date of Child's Admission: _____ Date of Withdrawal: _____
 Weekly Tuition: _____ Daycare Administrator Signature: _____