



Parental Agreement Form

Starting ___/___/___ Early Childhood School of Georgetown will be providing early childhood programming for _____, whose schedule will be: _____.
The monthly rate of \$ _____ is due by 5:30 PM on the 1st of each month.

Please review the following policies as outlined in the attached summary document and initial each one.

_____ Tuition late fee policy

_____ Enrollment/Re-enrollment Policy (non-refundable deposits)

_____ Illness Policy

_____ Holidays and Closings

_____ Late Pick Up penalty/fees

_____ Schedule change policy

_____ Peanut Safe School

_____ Withdrawal Policy

_____ Immunization and Attendance at School

I (we) understand and agree to follow the policies and procedures as stated in the ECSG summary documents. I also understand that from time to time ECSG may implement or change policies as needed. I understand that we will be notified of such changes.

Parent/Guardian Signature and Date

Thea Dusseault_____
Director Signature