



WeVillage Enrollment Agreement
2021-2022

Child's name _____ Age DOB _____
Child's name _____ Age DOB _____
Parents name _____
Email Address _____
Location _____ Start Date: _____
Deposit Date: _____
Tuition Rate _____
Flexcare _____

***Please initial each statement and sign at the bottom.**

_____ Monthly tuition is due VIA CHECK, ACH or ZELLE Karen@wevillage.com we do not accept monthly tuition on CC or Venmo @wevillage(Please circle your form of tuition method of payment)

_____ If you choose to make an arrangement there is a 3% fee for all CC charges for anything other than hourly or daily care.

_____ I have enrolled my child in:

- _____ Infant Care
- _____ Toddler Care
- _____ Preschool
- _____ Afterschool
- _____ Flexible Childcare

\$200 _____ Deposit (not applicable to flexcare)

\$250 _____ LA Enrollment FEE

\$200 _____ Portland Enrollment FEE individual

\$250 _____ Portland Enrollment Fee family

_____ I authorize WeVillage to store my CC on file for fees associated with my care.

_____ Flexcare reservations must be made, I understand cancellation of appointments if not done in the time frame permitted will result in the time of care booked being charged. 24 hours for infants and toddlers and 12 hours for preschool is required. If I cancel because of a medical reason I must provide a doctor's note in order to have fees waived.

_____ I understand meals are not included in my tuition and are either \$100.00 per month or \$6.00 per meal (portland)



_____ I understand meals are not included in my tuition and are either \$150.00 per month of \$8.00 per meal (LA)

_____ I understand that I am responsible for the enrollment fee and paying non-refundable yearly materials of \$100.00 in addition to monthly tuition costs.

Not applicable to Flexcare

_____ I understand that if my tuition fees are not received on the due date, I will be responsible for paying a \$35 late fee and/or lose my child's spot and I will be responsible for ONE month of care.

_____ I understand that if I do not have a valid form of payment at the time of charge I will be charged a \$35.00 fee

_____ I understand that If I am late for pick WeVillage rates will apply and if after closing time \$3.00 per minute

_____ I understand that ALL center hours are currently 8-5pm (Oregon) offer's before and after care from 7:30am and 5:30pm these are additional costs at the prorated hourly care rates for your child's age group for either or both times. These need to be prearranged and the director needs to be notified the day before. If you do not arrange for after or before care you will be charged \$3.00 per minute

_____ I understand that extra fees may be charged for special events, field trips and outings. A 1-week notice will be given to parents if this should arise.

_____ I allow my child to be photographed for classroom displays and Instagram/FaceBooks posts.

_____ I allow my child to take walks and play outside in our backyard, or at the park for the Pearl District and NE Broadway.

_____ I allow my child to participate in water play and I will provide sunscreen labeled and swim gear. (a separate form needs to be filled out for authorization to apply sunscreen. Please ask the front desk.

_____ I understand that NO credit will be given for absences due to vacations, illness and holidays. Holidays Labor Day, Memorial Day, Christmas Eve, Christmas Day, New Year's Eve and New Year's Day, Thanksgiving and day after.

_____ I understand that I must LABEL everything that I bring into the center including: Bottles, bottle Ice bag, food storage containers, diaper bag on the outside, blankets, sleep sack, items of clothes and Socks.

_____ I understand that WeVillage is a NO nut facility that includes all tree nuts. Sun butter sandwiches need to be labeled with sun butter and a staff member notified. No peanut butter allowed.



_____ I understand that I will provide a mask for children over the age of 2 years of age as recommended by the CDC. Oregon is over the age of 5 years!
WeVillage enforces mask wearing to the best of our ability.

_____ I understand I must notify the center if my child will be absent from school, if a child is sick I will notify center of the illness and provide a doctor's note before returning

_____ I understand that if my child develops a fever over 100 degrees my child will be sent home.

_____ I understand my child can't return to care until they have been fever free for 24 hours and a negative covid test is presented.

_____ I understand that I need to give a 30 day written notice if I plan to withdraw my child or change the care schedule, if I do not I will be charged for half of next months care and forfeit my deposit

_____ Early termination will result in me forfeit my deposit and a fee and half a month of tuition will apply.

_____ I understand that changes to this contract can only be made with director approval as space allows, and that if I desire additional hours or days of care beyond what I have signed up for they will be at Normal WeVillage Rates.

_____ I realize WeVillage reserves the right to adjust the schedule or increase in price as needed upon 30 days written notice.

_____ WeVillage has the right to remove a child from care if it is not a good fit for the child or our program.

Parents signature

Date

Directors signature

Date