



**Early Childhood Development Center (ECDC) Enrollment Agreement
2019-2020**

1. I have read and agree to all the policies and procedures in the Parent Handbook.
2. An annual nonrefundable registration and materials fee of \$150 is due upon enrollment. I understand that tuition is due on the 1st of each month. I understand that a \$25.00 late fee will be assessed if tuition is not made current by the 5th of each month. An account must be in good standing by the 20th of the month or student is subject to termination.
3. I have read and accept the illness, injury, and discipline policy.
4. I have read and accept the photography policy. DMUSD ECDC will not use any photo that reveals identities of children for public communications.
5. I have been given the opportunity to attend the monthly tour with the ECDC director/site supervisor prior to enrolling my child to the program.
6. I understand the ECDC will not provide snacks & meals and I am responsible to provide breakfast, snacks & lunch in compliance with the healthy choices' initiative.
7. I give my permission for my child to participate in all lesson planned activities, including lessons involving food (we are peanut free environment).
8. I understand and accept all medications must be in the original containers with prescription information and locked for safe-keeping. A medicine authorization (LIC 9221) form must be completed and signed for my child to receive any medications at the ECDC.
9. I understand that withdrawal from the ECDC requires a written 30-day notice to the ECDC Office. Tuition will be charged if proper notice is not given.
10. I understand and accept the ECDC will have early dismissal on the 4th Wednesday of each month at 1:45pm for in-service training.
11. I understand and accept my child may take a supervised walking field trip on the District campus.
12. I give my permission for staff to apply sunscreen on my child for sun protection.
13. I agree to release the Del Mar Union School District and its officers, employees, and representatives of any liability from accidents or incidents occurring on district property. I agree to arbitrate with the DMUSD ECDC to resolve any and all issues.

I have read the Enrollment Agreement and had the opportunity to ask questions. I understand and agree to abide by the policies and procedures within.

Parent/Guardian Name: _____ Child's Name: _____

Parent/Guardian Signature: _____ Date: _____

Director/Site Supervisor Signature: _____ Date: _____