



2019-2020 Tuition and Enrollment Agreement



Full Name of Student: _____

Person(s) Responsible For Tuition:

a. Full Name: _____

b. Home Address (Street, City, State, Zip):

I (We) wish to enroll the above named student ("Student") in De Colores Learning Center ("School") for the 2019-2020 year (September to August).

Policies

Period of Enrollment: I understand and agree that the period of enrollment shall be for the entire 2019-2020 school year (September 2019 through August 2020) or, in the case of a Student entering after the school year has begun, from the date of enrollment through August 2020.

Commitment for the Full School Year (September 2019 through August 2020): I understand that De Colores Spanish Immersion Center has granted to the Student one of a limited number of placement positions. Having accepted one of such limited number of placement positions, I understand and agree that there will be no refund, credit, or remission of fees or tuition in the event of the absence, withdrawal, or exclusion of the Student from De Colores Spanish Immersion Center except as provided in the **Withdrawal from School** and the **Mandatory Withdrawal Policy** below.

Initial Enrollment Fee (For New Students Only): Upon acceptance to De Colores Spanish Immersion Center, and enrollment fee of non-refundable enrollment fee of \$250 is due and will be included with the first month tuition.

Deposit: For all families for the 2019-2020 school year: the deposit is non-refundable if a student leaves the De Colores program prior to the end of the school year (the last school day of August 2020). If a student remains through August 2020, the deposit will be applied to the last month of tuition (August 2020).

Time option: De Colores Spanish Immersion Center provides care and instruction in three-different classrooms for three different groups. Full-time care is provided from 8 am to 6 pm, Monday-Friday, except on the days noted on the school calendar. Part-time care is available for the Infant and Toddler groups from 8 am to 6 pm, with a minimum of three-days a week, subject to availability and approval by the Director. There are no half-day options. I understand that the following time-options are available for each group and that the part-time care is subject to approval of the Director:

Infants (6 months to 18 months) - Full-time and Part-time (three/day per week minimum)

Toddlers (6 months to 18 months) - Full-time and Part-time (three/day per week minimum)

Pre-K (36 months to 60 months) - Full-time only

Sibling/Priority and Sibling Discount: I understand that siblings receive an enrollment preference in De Colores, but they are not guaranteed enrollment, which is subject to availability. I understand that if two (or more) siblings are simultaneously enrolled at De Colores Spanish Immersion Center a 10% discount is offered for sibling tuition on the lower of the two tuitions if not in the same class.

Payment and Make-up Days for Part-Time Students: Part-time students will adhere to a three-day per week schedule mutually agreed upon by the Director and the student's family. Tuition will be charged for the full-month for agreed upon days regardless of closings due to holidays, inclement weather, professional development days or student absences due to health, vacation, exclusion, or withdrawal. There will be no refund, credit, or remission of fees or tuition, or make-up days provided for holiday or inclement-weather based closings and/or absences for any reason that occur on a part-time student's scheduled day.

Withdrawal From School: In consideration for the timely payment of the monthly Tuition and compliance with the policies of the De Colores Spanish Immersion Center as explained in the De Colores Spanish Immersion Center handbook, the Student may withdraw from School and terminate this agreement under the following conditions:

- 1 A written letter of intent to withdraw is submitted to the School. This letter shall be effective on the first day of the calendar month following the date of submission ("the Effective Date")
- 2 Thirty (30) days from the Effective Date, the Student shall be considered to have voluntarily withdrawn from the school ("the Withdrawal Date").
- 3 Any payments due after the Withdrawal Date shall be cancelled, except any outstanding balances accrued up to the Withdrawal Date.

Late payments: In the event any payment shall be more than 15 days late, De Colores Spanish Immersion Center shall have the right to withhold any and all services for the Student and/or parent. The tuition and any other costs that have not been paid are due immediately.

Change of time option: I understand that I can request to change time options effective the first of each month ("Change Date"), provided I give written notice to the Director on or before the 20th of the previous month and that these requests are considered on a space available basis.

Meals and Nutrition: De Colores has partnered with the DC non-profit organization CentroNía to provide and promote healthy diets for young children receiving care at De Colores. CentroNía has a group of nutritionists and cooks that provide nutritious and balanced meals to DC licensed child care centers. As part of our partnership, through their NiaCentral project, CentroNía provides us with daily hot lunch and snack. This is included in the price of tuition. Their menus respect allergies and vegetarian diets. They can also make meals gluten-free. meals are made from scratch at their facility, and they use local and organic ingredients from nearby farms whenever possible.

DC Health Forms: I understand that the District of Columbia requires that I provide the following medical documents to De Colores Spanish Immersion Program and that they be updated as needed:

- DISTRICT OF COLUMBIA UNIVERSAL HEALTH CERTIFICATE (Proper completion of this form requires annual or bi-annual well-check updates as well as vaccination record updates)
- ORAL HEALTH ASSESSMENT (Ages 3 and Older)

I understand that failure to provide De Colores Spanish Immersion Program timely updates of these forms will result in a District of Columbia required absence until the forms are completed and provided to De Colores Spanish Immersion Program.

Mandatory Withdrawal Policy

The De Colores Spanish Immersion Center may temporarily exclude or permanently terminate a Student's enrollment as follows:

Upon two weeks' notice for the following reasons:

- Parental failure to abide by school policies and/or this Agreement
- School's program is not meeting developmental or special needs of the Student as determined by the educational director

Immediate withdrawal without prior warning may result for the following reasons:

- An account that is past due for fifteen days and/or disregard of tuition policies
- A pattern of late pick-up as determined by the administration
- Health or behavioral reasons on the part of the Student
- Conduct of parent, guardian, or a Student that the school administration or owner of the school, in his or her sole and absolute discretion, determines is threatening to the well being, safety, or stability of the students or staff.

Child's Name _____ **Birth Date** ____/____/____

Signature of Parent or Guardian _____ **Date** ____/____/____

Promotional Materials:

I give permission to De Colores Spanish Immersion Center to use photographs, videos, and/or movie clips taken of or by the above-named child for promotional use in school displays or on the school's web page.

Initial Here: _____

Emergency Medical Attention:

I give my express consent to De Colores Spanish Immersion Center, or any agency acting in its behalf, to secure and provide any medical and dental attention deemed necessary in the discretion of De Colores Spanish Immersion Center for my child during a period when I cannot be contacted by telephone. I further agree to assume complete financial responsibility for any and all medical expenses incurred on behalf of my child under the above conditions. I agree to release, indemnify and hold harmless De Colores Spanish Immersion Center and its agents for any and all damages arising from medical conditions, both known and unknown, not directly caused by the School's gross negligence.

Initial Here: _____

2019-2020 Tuition Rates

(commencing September 2019)

Full-time Tuition Rates - 2019-2020			
Infant Program			
		Monthly	Annually
Full-Time	8:00am - 6:00pm	\$2,050.00	\$24,600.00
Toddler Program			
		Monthly	Annually
Full-Time	8:00am - 6:00pm	\$1,925.00	\$23,100.00
Pre-Kindergarten Program			
		Monthly	Annually
Full-Time	8:00am - 6:00pm	\$1,725.00	\$20,700.00

Part-time Tuition Rates – 2019-2020		
Infant Program		
		Daily
Part-time	8:00am - 6:00pm	\$100
Toddler Program		
		Daily
Part-time	8:00am - 6:00pm	\$100
Pre-Kindergarten Program		
		Daily
Part-time	8:00am - 6:00pm	\$100

LATE FEES: Fees for late pick up after 6:00 p.m. are due upon pickup (paid to the teacher required to stay overtime) and are assessed as follows: \$5.00 for the first five minutes and \$2.00 for every additional minute.

SIBLING DISCOUNT: 10% discount offered for sibling tuition on the lower of the two tuitions if not in the same class.

Payment Options

Please check the payment plan you desire:

___ **Twelve Payment Plan:** Twelve consecutive monthly payments of which represent the sum of the tuition plus any other fees. The first payment is due on the first day of service and the remaining payments are due each month on the first date of classes for that month. A monthly invoice will be e-mailed to parents. These payments will be made by a monthly check to be deposited in the payment box located in each classroom.

___ **Twenty-Four Payment Plan:** Twenty-Four consecutive -bimonthly payments which represent the sum of the tuition plus any other fees. The first payment is due on the first day of service and the remaining monthly balance on the first day of the third week of classes for that corresponding month. Subsequent payments are due each month on the first date of classes for that month. A monthly invoice will be e-mailed to parents. These payments will be made by a monthly check to be deposited in the payment box located in each classroom or made via our secure online payment system.

Parent's Name: _____

Home Address (Street, City, State, Zip): _____

Home Phone : _____

Student's Name:

I (We) wish to enroll the above named Student in De Colores Spanish Immersion Center for: the 2019-20120 year from September 2019 through August 2020.

I have read and understand De Colores Spanish Immersion Center. I agree to abide and support the policies as specified.

Parent Signature: _____

Date: _____

Person Responsible for Tuition (If different than Parent):

Date:

Please keep a copy of this enrollment agreement for your records and return the signed and initialed agreement.