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### ENROLLMENT AND FEE AGREEMENT

Child's Name: \_\_\_\_\_ DOB \_\_\_\_\_  
Child's Name: \_\_\_\_\_ DOB \_\_\_\_\_  
Address: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Mother's Name \_\_\_\_\_ Ph#: \_\_\_\_\_  
Place of Employment: \_\_\_\_\_ Wk. Phone #: \_\_\_\_\_  
Father's Name: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Moms E-Mail Address: \_\_\_\_\_  
Dad's Email Address: \_\_\_\_\_

The following is a brief summary of what I have read as the Operational Policies for the **KinderClub Learning Center TOO, LLC**.

- Hours, days, and months of operation;
- Procedures for drop-off and pick-up of children in care;
- Illness and exclusion criteria;
- Procedures for dispensing medication, or a statement that medication is not given;
- Procedures for parental notifications;
- Discipline and guidance practices;
- Meals and food service practices;
- Immunization requirements;
- Hearing and vision screening requirements;
- **Mandatory Fundraisers;**
- Enrollment procedures, including how and when parents will be notified of policy changes;
- **2 week withdrawal notice** required, tuition still due during 2 week notice.
- Transportation and
- Procedures on questions with center policies, visitation, parent participation, parental review of minimum standards and instructions on how to reach PRS child abuse hotline

A non-refundable registration fee of **\$30** and **\$80** building/maintenance fee, both per semester January & August, is due and payable at the beginning of each semester. For our Summer Program (June) there is a building/maintenance fee of **\$60** due upon enrollment. Late fees of \$5.00 a month will be added to any fees not paid on time. For those parents receiving **CCS services**, Copayments are due by the **1<sup>st</sup> of every month** and a supply list will be provided. Any CCS Co-Pays paid after the 4<sup>th</sup> day of the month are assessed a \$10 late fee. Building/Maintenance fee also applies to those receiving CCS. Late fee will also be applied to tuition and if child is not picked up on time.

**My signature verifies I understand the enrollment terms and fees, have read the operational policies and agree to abide by the requirements.**

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Director/Owner Signature

\_\_\_\_\_  
Date

**For office use only:**

Start Date: \_\_\_\_\_ Referred by: \_\_\_\_\_  
Private \_\_\_\_\_ CCS \_\_\_\_\_ Other \_\_\_\_\_  
Tuition Rate \_\_\_\_\_ CCS Copay Amt \_\_\_\_\_