

Child Name: [redacted] D.O. B:

This Registration Form and non-refundable Registration Fee of \$100.00 is required to hold your child's spot at the **KIDZ WITH GOALS UNLIMITED**. **Two weeks is required in letter form if the child is being disenrolled. You are responsible for the two week's of tuition.**

Kidz With Goals Unlimited will be closed on all statutory holidays,(specific dates will be made available to parents in advance), Payment is required for the statutory holiday outlined in the Parent-Provider Contract. Families are entitled to 5 "Days Off" at half-rate to use for days when their child is absent from daycare for any reason(ie. For sick days, vacation days (after 1 year) etc). **A Doctor's note will be required for the half-rate to be applied to the child account.**

Fees are due each Friday for the dates of care. A \$35 day late fee will be charged if your payment is not paid on time. (If a statutory holiday falls on a Friday the payment will be due on that Thursday). We do not offer Part-Time care at this time. You are paying for a spot and not by attendance.

My child will be at **KIDZ WITH GOALS UNLIMITED** on the following days and for the hours listed below.

Discount: 5% for Military and Sibling Only

DAY	ARRIVAL	PICK-UP
MONDAY		
TUESDAY		
WEDNESDAY		
THURSDAY		
FRIDAY		

I agree to pay a weekly total of \$ [redacted] for the above listed days and hours. These are my **contracted hours**, for which payment will be required each week. Field Trips are not included in the set price during summer enrollment.

I have read the Kidz with Goals Unlimited **Parent-Provider Contract**. I agree to abide by the terms and policies laid out in the handbook and contract. I understand that failing to comply with contracts and policies on my part, will be grounds for discontinuation of care.

Signed: _____ Date: _____