



# AristoCat Children's Academy

## New Student Enrollment Packet

| <u>Office Checklist</u> | <u>Parent Checklist</u> | <u>Items Required</u>  |
|-------------------------|-------------------------|--|
|                         |                         | Current Immunization Records for each child must be in the office at the time of enrollment                        |
|                         |                         | Child Admission Agreement & Health Assessment for each child   |
|                         |                         | Student Schedule   |
|                         |                         | Signed Parent Agreement  |
|                         |                         | Signed Photographic Authorization Form   |
|                         |                         | Signed Field Trip Permission Form  |
|                         |                         | If applicable, state assistance and/or 1st month of tuition payment received                                       |
|                         |                         | \$50 Registration fee paid at the time of enrollment   |
|                         |                         | Potty Training/Behavior History  |
|                         |                         | Complete paperwork must be received by the office, 48 hours (minimum) before a student can attend their first day. |



# Child Admission Agreement

Name of Child

Birthdate

Enrollment Date:

Nickname

Sex (check one)

M   
F

Street Address

Mailing Address

City

State

Zip Code

Mother's/Guardian's Name

Birthdate:

Email:

Cell #

Home #

Work #

Employer

Father's/Guardian's Name

Birthdate:

Email:

Cell #

Home #

Work #

Employer

How did you hear about us?

## Emergency Contacts (Other than Parents) and persons Authorized to Pick-Up the Child

| Name  | Relationship to Child | Address | Phone # |
|---|-----------------------|---------|---------|
|   |                       |         |         |
|   |                       |         |         |
|   |                       |         |         |
|   |                       |         |         |
| <input type="checkbox"/> Check if there are no emergency contacts available, other than parents.            |                       |         |         |
| <input type="checkbox"/> Check if there are no persons authorized to pick up the child, other than parents. |                       |         |         |
| Out of Area/State Contact Name (if available)   | Relationship to Child | Address | Phone # |
|   |                       |         |         |

In case of emergency or serious illness, when parents cannot be reached immediately, I hereby authorize the provider to obtain emergency medical care and/or provide emergency medical transportation for my child.

Signature of Parent or Guardian

Date

I hereby give the provider permission to transport my child in the provider's vehicle for the following (optional):

To and From School     On Field Trips (with written permission in advance)     Other

Signature of Parent or Guardian

Date



# Child Health Assessment

Please Write Clearly

Name of Child \_\_\_\_\_ Birthdate \_\_\_\_\_

### Check all that apply:

Does your child have any known allergies or sensitivities to:

|             | No                       | Yes                      | If Yes, Please List: |
|-------------|--------------------------|--------------------------|----------------------|
| Medications | <input type="checkbox"/> | <input type="checkbox"/> | _____                |
| Foods       | <input type="checkbox"/> | <input type="checkbox"/> | _____                |
| Other       | <input type="checkbox"/> | <input type="checkbox"/> | _____                |

Illness or Medical Conditions:

Does your child have any of the following?

|                    | No                       | Yes                      |                                  | No                       | Yes                      |
|--------------------|--------------------------|--------------------------|----------------------------------|--------------------------|--------------------------|
| Asthma             | <input type="checkbox"/> | <input type="checkbox"/> | Visual Impairment                | <input type="checkbox"/> | <input type="checkbox"/> |
| Diabetes           | <input type="checkbox"/> | <input type="checkbox"/> | Developmental Delays             | <input type="checkbox"/> | <input type="checkbox"/> |
| Seizures           | <input type="checkbox"/> | <input type="checkbox"/> | Physical Impairment              | <input type="checkbox"/> | <input type="checkbox"/> |
| Heart Problems     | <input type="checkbox"/> | <input type="checkbox"/> | Behavioral or Emotional Problems | <input type="checkbox"/> | <input type="checkbox"/> |
| Hearing Impairment | <input type="checkbox"/> | <input type="checkbox"/> | Other:                           | <input type="text"/>     |                          |

Please list any allergies your child has with what their reactions are:

List any additional health information or special instructions you feel we need to be aware of:

\_\_\_\_\_

List any regular medications your child takes:

\_\_\_\_\_

Name of Child's Medical Provider:

\_\_\_\_\_

Signature of Parent or Guardian

Date

This form must be completed for each child enrolled and must be reviewed annually by the parent/guardian, and any changes noted.

|                              |       |                            |       |
|------------------------------|-------|----------------------------|-------|
| Reviewed and/or Update Date: | _____ | Parent/Guardian Signature: | _____ |
| Reviewed and/or Update Date: | _____ | Parent/Guardian Signature: | _____ |
| Reviewed and/or Update Date: | _____ | Parent/Guardian Signature: | _____ |



# Student Schedule

Please mark which days during the week your child(ren) will be attending the Academy.

Child's Name \_\_\_\_\_ Age \_\_\_\_\_

| Monday | Tuesday | Wednesday | Thursday | Friday |
|--------|---------|-----------|----------|--------|
|        |         |           |          |        |

Child's Name \_\_\_\_\_ Age \_\_\_\_\_

| Monday | Tuesday | Wednesday | Thursday | Friday |
|--------|---------|-----------|----------|--------|
|        |         |           |          |        |

Child's Name \_\_\_\_\_ Age \_\_\_\_\_

| Monday | Tuesday | Wednesday | Thursday | Friday |
|--------|---------|-----------|----------|--------|
|        |         |           |          |        |

Child's Name \_\_\_\_\_ Age \_\_\_\_\_

| Monday | Tuesday | Wednesday | Thursday | Friday |
|--------|---------|-----------|----------|--------|
|        |         |           |          |        |

Signature of Parent or Guardian \_\_\_\_\_ Date \_\_\_\_\_

On this form, one section must be completed for each child enrolled and must be reviewed annually by the parent/guardian, and any changes noted.

|                              |       |                            |       |
|------------------------------|-------|----------------------------|-------|
| Reviewed and/or Update Date: | _____ | Parent/Guardian Signature: | _____ |
| Reviewed and/or Update Date: | _____ | Parent/Guardian Signature: | _____ |
| Reviewed and/or Update Date: | _____ | Parent/Guardian Signature: | _____ |



# Parent Agreement

## **Mission Statement**

AristoCat Children's Academy exists to provide an affordable, safe, developmentally appropriate gateway to a bright future. We are committed to strengthening the bridge between your work and family life by creating a special place that supports them both. Our focus is to provide a stimulating learning experience that promotes each child's social, emotional, physical, and cognitive development. Our goal is to support children's desire to be lifelong learners.

## **Non-Discrimination:**

AristoCat Children's Academy is committed to providing an environment free of unlawful discrimination. We do not discriminate based on race, gender, national origin, religion, sexual orientation, or disability. Families requiring reasonable accommodation because of their religion or disability should direct that request to the Academy Director. Each request will be considered on an individual basis.

## **Schedule of Operation**

Parents are requested to strictly observe the hours of operations so that children are always properly supervised.

## **Hours and Holidays**

The following holidays will be observed:

Martin Luther King Jr. Day (January 17<sup>th</sup>)

President's Day (February 21<sup>st</sup>)

Memorial Day (The last Monday of May)

Juneteenth Day (June 20<sup>th</sup>)

Independence Day (July 4<sup>th</sup>)

Pioneer Day (Day of or the following Monday)

Labor Day (The first Monday of September)

Columbus Day (October 10<sup>th</sup>)

Veterans Day (November 11<sup>th</sup>)

Thanksgiving Holidays (Thanksgiving Thursday and the following Friday)

Christmas Break (Christmas Eve, Day & any following days of that week)

New Year's Day (year pending)

**In addition, the academy will be scheduled for four in-service days per year.** These days will be for teacher continued education and curriculum preparation. These dates will be given to you no less than one month in advance, as well as listed on our annual schedule, provided



when enrolled. The academy reserves the right to close on any other day that is not listed above, and a written notice will be posted as soon as possible.

### Registration Fee

All families are required to pay an annual, non-refundable registration fee of \$50.00 upon enrollment, and every year in August. The fee is due at the time of registration, as well as annually with August tuition.

Signature of Parent or Guardian \_\_\_\_\_ Date \_\_\_\_\_

### Tuition

Fees must be paid before services are rendered. Tuition is charged through Tuition Express on the 1<sup>st</sup> of every month unless it falls on a weekend or holiday, then it will process on the following business day. All charges & payments can be viewed on our check-in computer each day, on [www.myprocare.com](http://www.myprocare.com), or the app, using the email you provide at the time of registration.

Remote payments can be made on [tuitionexpress.com](http://tuitionexpress.com).

**Infants (0-23m) spaces are FULL TIME ONLY (Monday thru Friday).**

Signature of Parent or Guardian \_\_\_\_\_ Date \_\_\_\_\_

### Payment

Tuition Express gives you the option of paying with an electronic check, debit card, credit card, or EBT (State Assistance). All payments via Credit or Debit card will incur a 4% convenience fee on every transaction. We encourage the use of a checking or savings to account for tuition payment.

Invoices and Payments may be tracked online after registration via [www.tuitionexpress.com](http://www.tuitionexpress.com), [www.myprocare.com](http://www.myprocare.com), and on the ProCare App. AristoCat Children's Academy does not accept cash or check. Teachers cannot accept fee payments in any way.

Signature of Parent or Guardian \_\_\_\_\_ Date \_\_\_\_\_

### Past Due Accounts

A parent whose account is delinquent will be denied access to the academy, and the child may not attend the center until the account is paid in full. A \$35.00 late fee will be applied every month the account is past due. Accounts that are past-due 30 days will be turned in to a collection agency of AristoCat Children's Academy's choice and all agency fees will be paid by the delinquent party.

Signature of Parent or Guardian \_\_\_\_\_ Date \_\_\_\_\_



### **Returned Checks and Delinquent Fees**

There will be a \$35.00 fee for all tuition transactions that are returned or declined for any reason.

Signature of Parent or Guardian \_\_\_\_\_

Date \_\_\_\_\_

### **Drop-in Policy**

To ensure proper ratios are always maintained, a 24-hour notice must be sent to our office via phone call, 435-654-7439, or office email, [acacademy@ymail.com](mailto:acacademy@ymail.com). Any child dropped off who is not on the schedule and has not been arranged to be at the center will be charged a \$65.00 drop-in fee. If your child cannot be accommodated, we can and will refuse service.

### **Waiting List Policy**

To hold your spot on the waiting list, there will be a non-refundable \$100 holding fee per month, per child. Once there is an opening, you will be contacted with a date to start enrollment. If paying more than three months, 30% of the holding fees will be credited towards your first full month of tuition. For any reason you would like taken off the waiting list, you **must** contact the director before the first of the month.

### **Absences and Vacations**

Regular attendance is encouraged. Any child who is absent from the center for a period lasting longer than two (2) consecutive weeks at any one time, without notifying the Academy Director, will automatically be removed from active enrollment, and will need to re-enroll before returning.

Absences of an entire week (M-F) will be adjusted to a \$100 holding fee, for the week absent, plus all tuition fees, if, notice is given to the office in written form before the absence.

Maximum of 4 weeks per fiscal year, per child.

### **Withdrawn / Termination**

Parents must notify the center director in writing via email two weeks before the withdrawal. All fees are due and payable during the final two weeks, regardless of termination cause.

AristoCat Children's Academy reserves the right to dismiss any child at any time with cause. Account balance must be paid within 30 days of dismissal; otherwise, the account will be referred to the company's collection agency, with fees to be paid by the delinquent party. Refusal and non-payment of tuition is cause for immediate dismissal.

Signature of Parent or Guardian \_\_\_\_\_

Date \_\_\_\_\_



## Sunscreen Policy

For your child's safety and health, we apply sunscreen each time we go outside between April and November. We provide sunscreen, if your child has an allergy to our sunscreen, you may provide an alternative sunscreen accompanied by a doctor's note.

## Parent Conduct

AristoCat Children's Academy requires the parents and others picking up or dropping off children to behave in a manner consistent with decency, courtesy, and respect. One of the goals of AristoCat Children's Academy is to provide the most appropriate environment in which a child can grow, learn, and develop. Achieving this ideal environment is not only the responsibility of the employees of AristoCat Children's Academy but, is the responsibility of each parent or adult who enters the Academy. All adults are required to behave in a manner that fosters this ideal environment. This includes refraining from swearing, threatening, physical /verbal punishment of a child, smoking, and confrontational interactions.

## Software Fee:

AristoCat Children's Academy utilizes a software program, in the classroom and our summer camps to actively communicate with parents about daily happenings. This is a mandatory program for all students that is \$7/month.

**There is a feature for you, to upload documents, however, it does not notify us if you have done so. Documents will still need emailed to [academy@ymail.com](mailto:academy@ymail.com)**

## Features Include:

- Receive pictures and beautiful daily reports via the app
- Download and share photos of your children!
- Record of assessments, activities, naps (and more!)
- Direct messaging program!

Signature of Parent or Guardian \_\_\_\_\_

Date \_\_\_\_\_

## Arrival and Departure

Preschool Classes begin promptly at 9:00 am. Please have your child here before the noted time to eliminate classroom disruption. Upon arrival, each child must be clean and fresh. Please bring your child with a clean face, clothes, and especially free of soiled diapers/underwear.





For the health of your child, all children, parents, and visitors must wash hands following the posted handwashing procedures before entering any classroom.

Children will not be released to anyone not pre-authorized on the emergency list. When someone needs to be added to the authorized pick-up, we prefer that a parent/guardian does this in person with a staff member on duty. However, we will accept a call made from the parent/guardian to the academy's direct phone line, where they will be prompted for verification and the name of authorized pick-up personnel. Children must be left with a staff member upon arrival and parents must notify a staff member when a child is leaving. Do not let your child enter or leave the building unaccompanied.

We strongly request that parents NOT drop children off during rest times, 12:00 p.m. - 3:00 p.m. (times vary depending on classroom) as it disrupts the rest of the class. If you wish to pick up or drop off your student(s) during this time, we ask that you inform us in advance either in person or on the app so that we can have them ready for your arrival.

While picking up or dropping off your child who is enrolled at the Academy; we urge you not to leave unattended children in your vehicle.

Parents agree to provide transportation to and from AristoCat Children's Academy. Once a parent signs their child out, the parent is then solely responsible for supervising their child while on Academy premises.

\*Cell Phones: We ask all persons to please finish their cell phone conversation before entering the building. The children are excited to see you and need your full attention. Take a minute to enjoy greeting your child and listening to what they have learned that day.

### **Late Pick Up**

Parents are requested to strictly observe the hours of operations so that children are always properly supervised. If a late pick-up occurs there will be a charge of \$20.00 for every fifteen minutes, starting at 5:31 p.m.

### **Social Media Policy**

If for any reason it is seen that you or your family/friend has posted or replied on a Social Media Platform and has made any derogatory remarks about the Academy or its staff and/or students, your child(ren) enrollment will immediately be terminated from the Academy. The two-week termination notice fee of 2-weeks tuition will also still apply.

Signature of Parent or Guardian \_\_\_\_\_

Date \_\_\_\_\_



## **Clothing**

Children should wear clothing that is comfortable, washable and allows for self-dressing. All items should be marked with the child's first and last name. We recommend that you provide a change of clothes in case of a spill or accident. Children need to wear sturdy closed-toe shoes as a matter of safety, particularly on the playground and field trips.

Aristocat Children's Academy will follow the ACA Clothing Policy. This includes the length of shorts, at least fingertip length, and NO tank tops (in which case, if one is worn an ACA t-shirt will be provided). Please bring your child in appropriate clothing for the day. We highly recommend the use of long or short sleeve sun-shirts in the summer for water play. If your child is wearing a bikini, an ACA t-shirt will be provided.

**ARISTOCAT CHILDREN'S ACADEMY IS  
NOT RESPONSIBLE FOR LOST OR DAMAGED ITEMS.**

## **Transportation**

Safety is our primary concern when transporting children. Our buses have scheduled maintenance and inspections. All children must wear a seat belt and remain orderly when riding in our buses.

If for any reason your child will not be riding from their school, you must notify the Academy 30 minutes before pick-up time.

**A \$15.00 fee will be charged each day** when the Academy is not notified to take the child's name off the pick-up schedule. The bus driver will wait five minutes at the assigned bus stop. If a child does not report to the bus in that time the driver will notify the Academy, and the school, then proceed to the next assigned pick-up location. The Academy director will call the parents for further instructions.

Our buses will not transport children during any weather conditions considered hazardous.

## **Field Trips**

Parents will be notified in advance of all field trips. Children are expected to follow all safety rules on field trips. Failure to abide by rules will be cause for the exclusion of a child from field trips. Younger children may go on walks through the neighborhood. All children are required to wear closed-toe shoes on field trips. If a class field trip is scheduled, and you wish for your child not to participate, you may be asked to make other care arrangements for your child for that day. When on field trips, we follow the same teacher/student ratio as in class.



## Meal Policy

AristoCat Children's Academy does not provide any meals.

Please sign to acknowledge that you have read the meal policy in the Parent Handbook, as well as understand and acknowledge the cost of an emergency meal being provided.

Signature of Parent or Guardian \_\_\_\_\_

Date \_\_\_\_\_

## Health

Parents are required to provide the Academy with a record of the child's immunizations. Please submit an updated form to the office when the child turns 2 months, 4 months, 6 months, 12 months, 18 months, 24 months, 5 years, and 7 years old. Parents also must sign an agreement giving the Academy permission to call a doctor in case of an emergency.

If your child becomes ill at the Academy, they will be isolated, and you will be notified at once to take the child home. Facilities are not available at the Academy for sick children. If the Academy calls a parent or guardian when their child becomes ill, parents are expected to pick up the child promptly. **Children need to be picked up within 30 minutes.** We require parents to come expeditiously without hesitation. If a parent does not come or refuses to pick up their child, they will be unenrolled from our program.

If your child develops an illness, rash, fever, etc., you should call the Academy and state the nature of their condition. Other parents may need to be notified in case of a contagious disease/outbreak.

A child with an elevated temperature, diarrhea, vomiting, or known illness will not be admitted to the Academy. If your child has a fever, vomiting, or diarrhea the night before, you are requested to keep him/her home to limit exposure to infections in the Academy. If your child is between 6 weeks and 5 years old, you may not bring your child to the Academy with a temperature above 101.00 degrees.

**If your child has three episodes of vomiting or diarrhea, you will be called to pick up your child.**

**If your child has a temperature of 101 and holding, and/or any signs or symptoms that are outlined in the Utah General Health Guidelines, we will call for you to pick up your child.**

**If a child is sent home from public school, AristoCat Children's Academy will follow district policy and the child will not be allowed at ACA.**



**The child must be FREE of any fever, vomiting, or diarrhea AT LEAST 24 hours before returning to AristoCat Children's Academy.**

**\*\*AristoCat Children's Academy has the right to change update these policies at any time for the safety and health of our students. This includes any outbreaks or epidemics that the local health department has declared. \*\*\***

### **Medication Authorization Forms**

A medication form must be filled out and signed by a parent, at the time of medication being brought into the Academy and before being administered to the child.

Any time medication is administered to a student it will be documented in the app that is used to communicate with parents, and on the form.

All medication must be in its original container and unexpired. ACA will follow ALL manufacture guidelines when administering medications including age requirements.

**Medications will only be administered to students under the age of 24 months IF a Drs. Note or prescription label is provided.**

Please sign here to acknowledge that you have read the information regarding digital medication authorization forms.

Signature of Parent or Guardian

Date

### **Rest Time**

All children at the Academy will rest after lunch. To protect your child's health, we provide a freshly sanitized cot, as well as a blanket and sheet. **Please do not send any sleep materials, as they will be provided.** Although children will not be forced to go to sleep during the nap period, nor criticized for not going to sleep, they will be required to rest quietly or do a quiet activity that is provided so that children who want to sleep may do so. Children can get off their mats/cots after 30 minutes if they can remain undistruptive to other students. Children only stay on their cots/mats longer than 30 minutes if they choose to do so. TV and videos are not used during nap time.

### **Incident /Accident Reports**

Should your child be involved in an incident/accident during the day, a staff member will complete a Digital Incident/Accident Report on the app. The report will be discussed at the time of pick up and signed by the parent or person picking up. Should a person other than the parent pick up the child on the day of the incident, it is then the responsibility of that person to sign the incident report. By signing the incident report, you are ONLY acknowledging that you were informed about the incident.

Please sign here to acknowledge that you have read the information regarding digital incident/accident reports.



**Abuse and Neglect**

As early care and education professionals, we are mandated by law to report any suspected cases of child abuse or neglect. We will not hesitate to seek help for any child. The Academy is required to contact the Department of Children Services for refusal to pick up a child at any time.

Signature of Parent or Guardian \_\_\_\_\_ Date \_\_\_\_\_

**Guidance**

Children must learn to see themselves as worthy, contributing participants with a sense of responsibility for their actions and respect for the rights of others. We believe in a positive approach to discipline with logical consequences for inappropriate behavior. When redirecting or guiding the child, consideration is given to both age and level of development for setting limits and schedules. Parents will be notified if there is a consistent behavior problem. Children learn and live by positive words and actions as a method of developing confident interpersonal skills.

**Conflict of Interest**

AristoCat Children’s Academy does not allow staff to care for enrolled /previously enrolled (past 36 months) children outside of the academy during academy business hours. Failure to comply with this policy can result in termination of enrollment for the child and termination for the employee. This matter is not taken lightly. Do not ask for staff personal information.

**Grievance Procedure**

Should you or your child have questions or concerns about any part of our program we ask you to speak directly with the center director or the center owner. We are committed to providing the best possible care for your children and understand there might be occasional misses in communication. Please talk to us so we can resolve any issues and/or concerns. If you have any further questions regarding the state regulations, please feel free to visit <http://health.utah.gov/licensing>

I HAVE READ, UNDERSTAND, AND ACCEPT THE POLICIES AND PROCEDURES OF ARISTOCAT CHILDREN’S ACADEMY. IF I NEED CLARIFICATION ON ANY POLICIES AND PROCEDURES I CAN AND WILL REFER TO THE FULL PARENT HANDBOOK THAT I WAS PROVIDED. I UNDERSTAND THAT THIS CONTRACT MAY BE REVIEWED AND REVISED AS NECESSARY AND THAT I WILL BE PROVIDED WITH WRITTEN NOTICE OF ANY SUCH REVISES/CHANGES AT LEAST 30 DAYS BEFORE ANY REVISIONS/CHANGES TO THIS AGREEMENT.

Signature of Parent or Guardian \_\_\_\_\_ Date \_\_\_\_\_

Signature of Parent or Guardian \_\_\_\_\_ Date \_\_\_\_\_



Signature of Director: \_\_\_\_\_

Date \_\_\_\_\_

## Photographic Authorization Form

To avoid undue disruption of children or students as they are involved in learning and to protect the privacy and individual rights of all persons, we must ask your full cooperation in adhering to our photography policies and procedures.

Freedom to photograph is limited by the following conditions:

1. No photographs are to be sold by or to anyone or used in any way for commercial purposes. This includes but is not limited to:
  - Newspapers
  - Contests
  - Magazines
  - Television

Without prior consent of the parent/guardian of the children in the photograph/film, and the Director.

2. Photographers are not to prompt, pose or otherwise distract children or teachers in the children's programs at AristoCat Children's Academy.

Intended Use for Photographs: To display on classroom bulletin boards, newsletters, social media, photomontage, child's projects, or crafts.

Please opt my child out of any photography that will go out on social media or newsletters.

Child(ren)'s Name: \_\_\_\_\_

Signature of Parent or Guardian \_\_\_\_\_

Date \_\_\_\_\_



# Field Trip Permission Form

Your child will have the opportunity to join their class on a field trip. Field trips provide one means of extending the learning environment beyond our academy. We want to simplify the process of granting field trip permission. Please fill out this form and return it to our academy. We need a separate form for each child in your family. Your child's teacher will send a not home before any field trips are taken. The academy will not provide lunches for field trips so please plan to send one with your child.

I give permission for my child \_\_\_\_\_ to go on all scheduled field trips with his/her class.

I do not give permission for my child to go on field trips.

Signature of Parent or Guardian \_\_\_\_\_

Date \_\_\_\_\_

If my child becomes ill or involved in an accident while away, I understand that the chaperone will seek medical attention for my child, the academy will contact me as soon as possible and I will be financially responsible for medical treatment. I further agree to hold AristoCat Children's Academy, its employees, and agents harmless for any injury or illness caused by the negligence of persons other than employees or agents for the Academy when such injury or illness occurs during the trip.

I \_\_\_\_\_, Understand that my child will be transported if he/she becomes ill, or is involved in an accident to seek medical attention, as stated above.

Signature of Parent or Guardian \_\_\_\_\_

Date \_\_\_\_\_

**ALL CHILDREN IN THE INFANT/TODDLER PROGRAM WILL GO ON WALKING FIELDS TRIPS DAILY IN OUR ARISTOCAT STROLLERS. THIS IS NOT OPTIONAL.**

I, \_\_\_\_\_, Understand that my child, if enrolled in the infant/toddler program, will go on walking field trips daily in the AristoCat Strollers.

Signature of Parent or Guardian \_\_\_\_\_

Date \_\_\_\_\_



**Automated Payment Processing**  
**Safe – Convenient – Easy**

We are excited to offer the safety, convenience and ease of Tuition Express® – a payment processing system that allows secure, on-time tuition and fee payments to be made from either your bank account or credit card.

**ELECTRONIC FUNDS TRANSFER AUTHORIZATION FOR BANK ACCOUNT and CREDIT CARD**

I (we) hereby authorize **AristoCat Children's Academy** to initiate credit card charges to the below-referenced credit card account (Section A) OR, initial debit entries to my(our) Checking or Savings Account, indicated below (Section B). To properly affect the cancellation of this agreement, I (we) are required to give 10 days' written notice. Credit Union Members: Please contact your Credit Union to verify account and routing numbers for automatic payments. Check with the center for accepted credit card types.

**Complete ONE SECTION ONLY**

**Section A (Credit Card) Subject to 4% fee for every transaction**

|                      |  |                 |           |
|----------------------|--|-----------------|-----------|
| Cardholder Name      |  | Phone #:        |           |
| Cardholder Address:  |  | City:           | State Zip |
| Account Number       |  | Expiration Date |           |
| Cardholder Signature |  | Date            |           |

**Section B (Bank Account)**

|                                      |  |                |           |
|--------------------------------------|--|----------------|-----------|
| Your Name                            |  | Phone #        |           |
| Address:                             |  | City:          | State Zip |
| Bank or Credit Union Name            |  |                |           |
| Bank or Credit Union Address         |  | City           | State Zip |
| Routing Transit # (see sample below) |  | Account Number |           |

Checking

Savings, is available, upon request.

**For Official Use Only**

|                    |
|--------------------|
| Date Received      |
| Employee Signature |



A service of

