



## **Admission and Financial Agreement**

I, \_\_\_\_\_ (parent/guardian)  
of \_\_\_\_\_, agree to pay an advanced monthly tuition in the  
amount of \$ \_\_\_\_\_. Total of which is to be paid on the first business day of each month  
for which the school agrees to provide or make available the care and services on \_\_\_\_\_ days and hour as  
follows

M\_\_\_\_\_ T\_\_\_\_\_ W\_\_\_\_\_ TH\_\_\_\_\_ F\_\_\_\_\_.  
Payments may be paid by cash, check or credit card. Please note a **3% fee** will be applied to each credit card  
transaction.

Cancellation of this financial agreement must be given in writing one month prior to child's last day.

**\*Tuition locked in for one year from start date. A 30 advance notice will be given for and  
tuition change after the first year.**

### **DELINQUENT TUITION**

If tuition is not paid by the 5th of each month I agree to pay the Lighthouse Center for Infants a late fee of  
\$25.00 If i have Non-sufficient funds, I agree to pay \$25.00 and the full tuition upon receipt of notification.  
Excessive late charges may result in termination of services.

### **NON-PAYMENT OF TUITION**

I hereby agree that all assumed fees for tuition incurred from nonpayment of tuition; on-sufficient funds  
(returned check), late fees, penalties, or any legal fees shall be my sole responsibility and not the responsibility  
of the Lighthouse Center for Infants.

I promise to pay the Lighthouse Center for Infants any tuition and/or fees that I have incurred during my child's  
enrollment at the Lighthouse Center for Infants. Fees may include, but are not limited to tuition, enrichment  
programs and T-shirt purchased. I hereby agree to pay full restitution of any and all tuition and fees for the  
period my child is enrolled.

### **TERMINATION OF ENROLLMENT**

Lighthouse Center for infants reserves the right to terminate a child's enrollment if the director and staff feel the  
center is not a good fit for child. Habitual late payment fees, habitual late pick-up fees or non-sufficient fund  
charges could result in the termination of enrolment

### **Refunds**

When LCI is given at least two weeks notice a refund prorated based on the unattended days of  
months prepaid tuition will be given.

### **HANDBOOK POLICIES**

I have received a copy of the Lighthouse Center for Infants Parent Handbook. I have read and understand the  
content and agree to all procedures and conditions set forth therein. I agree to participate in the Lighthouse  
Center for Infants functions. I am aware of the scheduled center holidays and vacation days and understand  
tuition is due during these times as well. I understand the Lighthouse Center for Infants does not provide make  
up days for absences, whether illness or any other reason.

**CUSTODY**

All information regarding my child’s custody, health care and immunization records is true and accurate to the best of my knowledge.

**THE RIGHTS OF THE LICENSING AGENCY**

The Department of Social Services, Community Care Licensing Division according to Title 22, Division 12, Chapter i Regulation 101200, states “The department has the authority to interview children staff and to inspect and audit child or child care center records, without consent. The school shall make provisions for private interviews with any child(ren) or staff member, and for the examination of all records relating to the operation of the child care center. The department has the authority to observe the physical condition of the child(ren), including conditions that could indicate abuse, neglect or inappropriate placement.”

I agree to complete and return all forms prior to my child’s enrollment. I have read and understand this Admission and Financial Agreement.

This agreement will remain in effect from start date: \_\_\_\_\_

End Date: \_\_\_\_\_

(to be filled out by director)

\_\_\_\_\_  
Signature of Father or Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Mother or Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Center Director

\_\_\_\_\_  
Date

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