

Parent Agreement 2020-2021

We/I _____ the parents of _____ have reviewed the current Parent Handbook and have become familiar with the policies and procedures at Sonshine Preschool. Please confirm (by initialing) that you have read and have a mutual understanding of the following policies:

____ My child's **Emergency Card** must be completed on **both sides** and submitted along with a copy of my child's most current immunization record in order for my child to attend preschool.

____ My child's **Enrollment Form** must be completed on **both sides** and submitted along with the signed **Enrollment Permissions Form** in order for my child to attend preschool.

____ We/I have downloaded the REMIND app from the App Store or Google Play Store and have allowed notifications so that I don't miss messages from my child's teacher or the school. **It is important that each family be on REMIND while we are using Covid-19 protocols.** This is the method we will be using to notify your family of any changes in protocol or updates regarding Covid-19.

____ **Tuition Payment Policy:** We/I understand that our monthly tuition payment is due on the 1st of each month and is late after the 5th of the month. We/I further understand that the preferred payment method is Tuition Express which allows me to set up automatic payments or make payments online. Visa, Mastercard, cash, or checks are also accepted. The Returned Check/Declined Payment fee is \$25. The Late Payment fee is \$25.

____ We/I understand that Sonshine Preschool follows the TUSD calendar for school closures, including but not limited to, Fall Break, Winter Break, and Spring Break. Tuition is a yearly amount divided into 10 equal payments with school closures already factored into the yearly tuition, therefore adjustments for closures are not made.

____ Hours of operation are 7:30am-5:30pm August - May and 7:30am-4:30pm for Summer Camp in June & July.

____ All children must attend our Preschool Program from 8:45am-12:00pm.

____ We/I have read the Illness Policy which includes the **24 hour rule and medication procedure.** If medication is necessary, a medication form must be completed in the office. Medication must be in the original prescription bottle or packaging and may only be dispensed as indicated on the prescription bottle, medication form, or on a doctor's note.

____ We/I understand that Snacks, Lunch, and a fresh Water Bottle are provided by parents each day. Snacks must have 2 food group components. Only 100% fruit juice or milk can be served with lunch along with 4 components. My child's lunch box/bag and water bottle are to be labeled with my child's first and last name. Food is not able to be microwaved.

____ We/I understand that Sonshine has a **strict NO NUTS policy which includes peanuts and tree nuts.** Checking labels on processed foods before including them in my child's food items is very important. I understand that items containing nuts or made in a facility with nuts will be removed from my child's lunch box and sent home with a reminder note.

____ We/I understand that in the event that a staff member witnesses any form of impairment of an individual picking up my child, including myself, my child WILL NOT be released and another contact person will be called to transport my child.

Parent Signature(s)

Date