

# TINY TREASURES PRESCHOOL ADMISSIONS AGREEMENT

180 WIKIUP DRIVE. SANTA ROSA, CA 95403  
(707) 544-8469  
Lic. #493002686

6170 Montecito Blvd.. SANTA ROSA, CA 95407  
(707) 539-8469  
Lic. #493005083

I agree to enroll my child, \_\_\_\_\_ in the  
Tiny Treasures Childcare Program beginning on \_\_\_\_\_

I have received, read, and understand the attached handbook and agree  
to comply with all the rules and responsibilities stated within.

My child's normal care will begin at \_\_\_\_\_, and end at  
\_\_\_\_\_, On **M T W T H F**.

The charge for care of the child is \$ \_\_\_\_\_ per \_\_\_\_\_. With  
the exception of one week (5 days) per year of vacation  
and/or sick days for full time students.

Any other sick or vacation days will be full pay days. \_\_\_\_\_

If any of the 8 following holidays listed in the parent fall on my child's  
normal care days they will be full pay days. \_\_\_\_\_

All forms must be completely filled out and returned before a  
child enters the program. \_\_\_\_\_

Your enrollment fee of \$50.00 is due prior to the care of your  
child. \_\_\_\_\_.

I agree to pay my invoice total promptly every two weeks or I will be  
subject to a \$20.00 per week late fee \_\_\_\_\_.

I agree to pick up my child by 5:45pm or I will be subject to a \$20.00  
late fee \_\_\_\_\_.

\_\_\_\_\_  
(Parents signature)

\_\_\_\_\_  
(date)