

**Mushroom Family Learning Center
School Contract and Medical Release 2012-2013**

Child's Name – First, Last, MI

MFLC Class

Please read the following information carefully:

- ◆ **PROGRAM:** My child has permission to use all of the play equipment and to participate in all school activities.
- ◆ **FIELD TRIPS:** My child may participate in field trips. I understand that it is the parents' responsibility for transportation to and from field trips. Field trips are viewed as a family experience at MFLC.
- ◆ **INFORMATION RELEASE:** Photographs of the program may be used for community presentations such as parent groups, career days, press releases. Further release of records would be upon request only.
- ◆ **TERMINATION OF ENROLLMENT:** The school reserves the right to terminate enrollment due to the delinquency of payment of fees, lack of cooperation of school policies, or the inability of the child or parent to adjust to the school program.

Please read the following Financial Contract carefully:

1. I agree to pay my child(ren)'s tuition in nine monthly installments by the designated dates. If payment for the non-refundable registration fee and the **FIRST MONTH'S TUITION** is not received by May 1, 2012, your child's space **WILL BE GIVEN** to another student. This tuition payment will be refunded in full if your child is withdrawn by July 15' 2012. There will be no refund after July 15' 2012.
2. Tuition is based on a full year of school. No credit is allowed for illnesses, holidays, vacations or emergency closings.
3. If tuition payment is not received by the fifteenth of the month, you will receive a written notice. If no payment is received within 30 days, a late fee of \$10.00 will be charged.
4. If early withdrawal becomes necessary, the tuition responsibility will end 30 days after written notice is received by the Executive Director.
5. A non-refundable registration fee of \$50.00 for one child or \$65.00 for more than one child must accompany this form.
6. I agree to pay my child(ren)'s Fundraising Fee by the designated dates. Fifty percent by November 1, 2012 and the remaining 50% by April 1, 2013.

Tuition checks should be made payable to Mushroom Family Learning Center and dropped into the tuition box or mailed to MFLC, 1240 Washington road, Pittsburgh, PA 15228.

Your signature on the reverse side indicates you have read this contract carefully, understand the terms and give approval to all.

PLEASE SIGN

Parent/Guardian Signature

Date

PLEASE SIGN MEDICAL RELEASE

MEDICAL RELEASE

If my child (above) needs medical treatment, it is my wish that such treatment be started while efforts are being made to contact me and my child's physician. And, that if you cannot contact me or the child's physician, you will call another physician, call an ambulance or have the child taken to an emergency hospital in the company of a staff member as may be appropriate. I accept responsibility for all costs for emergency treatment.

Parent/Guardian Signature

Date

Parent copy – please retain for your records.