



Child's Name: _____

Primary Payer (Initial/Date): _____

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SCHEDULED ATTENDANCE

Full Time and Part Time Schedules are available

Full Time - 5 days per week Mon/Tues/Wed/Thurs/Fri

Part Time – 4 days per week Mon/Tues/Wed/Thurs

Part Time - 3 days per week Mon/Wed/Fri

Part Time - 2 days per week Tues/Thurs

CENTER HOURS:

Marshall Childcare Center Program is open Monday through Friday, 7:00am until 5:30pm.

Marshall Childcare Center will be closed on days in which the following holidays are recognized: New Year's Day, Martin Luther King, Jr. Day, Presidents' Day, Good Friday, Memorial Day, Independence Day, Labor Day, Thanksgiving and the day after, Christmas Eve, Christmas Day and New Year's Eve.

SCHEDULE ACKNOWLEDGMENTS

1. **Regular Schedule** – Tuition is based on the child's regular schedule. Tuition and fees are not reduced in the event that a child is ill or for holidays. The weekly tuition rate will be due in full even if a child is absent for one or more days.
2. **Schedule Changes** – A two-week notice is required for all schedule changes. NO EXCEPTIONS. All changes must be approved through the Administrator and parents will be required to sign an updated contract.
3. **My ProCare Connect** -- Parents/Guardians are required to use their attendance code to clock children in and out each day.
4. **Absences** -- Please notify the center by 10:00am when a child will be absent for the day.
5. **Last Day Notice** – A two-week written notice is required to withdraw a child. The primary payer is still responsible for all remaining balances on the account.

INVOICE POLICIES

1. **Registration Fee** – A non-refundable annual registration fee is due at time of enrollment and every summer thereafter.
2. **Weekly Tuition** – Parents/caregivers are responsible to pay tuition weekly online through your MyProcare account.
3. **Weekly Tuition Due** – Invoices will be sent out on the Monday *before scheduled attendance*. Invoices are due in full by the Wednesday *before scheduled attendance*. A late fee of \$ 25 will be applied to all invoices left unpaid after 11pm on the Wednesday they are due.
4. **Registered Days or Weeks** – Will be charged the prior week before attending.
5. **Center Closures** –
 - a. **Holidays** – Tuition will not be reduced as a result of center closures due to holidays.
 - b. **Extreme Weather** – Tuition will not be reduced as a result of extreme weather which consists of Level 2 snow or above and/or weather emergencies beyond our control.
6. **Child Illness** – Tuition will not be reduced as a result of a child being out ill.
7. **Late Pick Up Fee** – A late pick-up fee of **\$2.00 per minute, per child**, will be assessed when a child is left beyond the center's operating hours. The late pick-up fee is not an agreement to provide after-hours service.
8. **Additional Fees** – Your child may have the opportunity to participate in special programs or walking field trips with an additional fee.

PAYMENT POLICIES

1. **Invoice** – Each week the primary payer will receive an invoice by email. No invoices will be mailed.
2. **MyProcare®** – Parents are required to register with MyProcare. MyProcare is an interactive parent portal where payers have access to view account balances, ledger history, child timecards, and make payments online.
3. **Electronic Payments Only** - All fees for services are to be paid electronically through Tuition Express using your MyProcare Connect account. Payments post automatically to your account ledger.



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4. **No Cash or Checks** - Cash and check payments will not be accepted.
5. **Declined Electronic Funds** – A fee of **\$25.00** will be applied for declined electronic funds transfer.
6. **Automatic Payments** – Automatic payments through checking, savings or credit card will be processed on Wednesday, prior to the week of service.
7. **Online Payments** – Online payments must be made through Tuition Express using your My ProCare account. Payments must be processed by Wednesday 11:00pm prior to the week of service.
8. **Late Payment Fee** – All tuition is due in advance. Balances not paid by Wednesday 11:00pm will be assessed a late fee of \$25.00 unless a payment arrangement has been approved. Payment arrangements must be made with the Accountant. If payment is not received by the due date, we reserve the right to offer the spot to another child on our wait list.
9. **Non-Payment** – Payments delinquent by one week may result in temporary suspension. Unpaid balances may be sent to debt collection and permanent suspension from services. If payment is not received by Monday, your child will not be able to attend on Tuesday until the outstanding payment is made.
10. **Rates** – 2025-2026 tuition rates are effective from 6/2/2025 through 5/28/2026 (Please see the tuition rates, below).
11. **Registration Fee** – To secure your child's placement, non-refundable registration fee is due upon preregistration.

RATE SCHEDULE EFFECTIVE 2025, Begins 6/2/2025 <i>(Children newly enrolled in Summer Camp 6/2/2025-8/18/2025)</i>	Single Rate	Per Child
Full Time Weekly Rate – 5 days	\$250.00	
Part Time Weekly Rate – 4 days	\$220.00	
Part Time Weekly Rate – 3 days	\$197.00	
Part Time Weekly Rate – 2 days	\$145.00	
Registration Fees (non-refundable)		\$50.00

☐ Registration Fee (non-refundable) \$50.00

☐ By checking this box, I am confirming I have fully read and agree to the acknowledgements, policies, and terms as outlined in this agreement and tuition rates.

Child's Name: _____

Primary Payer Responsible for Payment - Print: _____

Primary Payer Responsible for Payment - Signature: _____

Primary Payer's Email Address: _____

Date: _____ **Primary Payer Social Security Number:** _____

(A social security number is required for registration to be complete.)



Marshall Childcare Center **School Age Summer Camp** Parent Agreement
June 2, 2025 – August 18, 2025 (Rev.05/14/2025)

Child's Name: _____

Primary Payer (Initial/Date): _____

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Child's Name _____ Date of Birth _____ Gender _____

Parent's Name _____

Parent's Address _____

City _____ State _____ Zip _____

Phone Number _____ Email _____

Parent's Name _____

Parent's Address _____

City _____ State _____ Zip _____

Phone Number _____ Email _____

Email addresses are required to have access to ProCare Connect.

Parent Signature _____ Date _____

****Please use the attached form to identify the dates and weeks that your child will be in attendance to reserve your spot in the Summer Camp Program.***

2025 Summer Camp

Registration – Pick and choose which days your child will need care over the summer. Place a checkmark on the days you will need care.

	Monday	Tuesday	Wednesday	Thursday	Friday
Week 1	<input type="checkbox"/> 6/2/2025	<input type="checkbox"/> 6/3/2025	<input type="checkbox"/> 6/4/2025	<input type="checkbox"/> 6/5/2025	<input type="checkbox"/> 6/6/2025
Week 2	<input type="checkbox"/> 6/9/2025	<input type="checkbox"/> 6/10/2025	<input type="checkbox"/> 6/11/2025	<input type="checkbox"/> 6/12/2025	<input type="checkbox"/> 6/13/2025
Week 3	<input type="checkbox"/> 6/16/2025	<input type="checkbox"/> 6/17/2025	<input type="checkbox"/> 6/18/2025	<input type="checkbox"/> 6/19/2025	<input type="checkbox"/> 6/20/2025
Week 4	<input type="checkbox"/> 6/23/2025	<input type="checkbox"/> 6/24/2025	<input type="checkbox"/> 6/25/2025	<input type="checkbox"/> 6/26/2025	<input type="checkbox"/> 6/27/2025
Week 5	<input type="checkbox"/> 6/30/2021	<input type="checkbox"/> 7/1/2025	<input type="checkbox"/> 7/2/2025	<input type="checkbox"/> 7/3/2025	<input type="checkbox"/> CLOSED
Week 6	<input type="checkbox"/> 7/7/2025	<input type="checkbox"/> 7/8/2025	<input type="checkbox"/> 7/9/2025	<input type="checkbox"/> 7/10/2025	<input type="checkbox"/> 7/11/2025
Week 7	<input type="checkbox"/> 7/14/2025	<input type="checkbox"/> 7/15/2025	<input type="checkbox"/> 7/16/2025	<input type="checkbox"/> 7/17/2025	<input type="checkbox"/> 7/18/2025
Week 8	<input type="checkbox"/> 7/21/2025	<input type="checkbox"/> 7/22/2025	<input type="checkbox"/> 7/23/2025	<input type="checkbox"/> 7/24/2025	<input type="checkbox"/> 7/25/2025
Week 9	<input type="checkbox"/> 7/28/2025	<input type="checkbox"/> 7/29/2025	<input type="checkbox"/> 7/30/2025	<input type="checkbox"/> 7/31/2025	<input type="checkbox"/> 8/1/2025
Week 10	<input type="checkbox"/> 8/4/2025	<input type="checkbox"/> 8/5/2025	<input type="checkbox"/> 8/6/2025	<input type="checkbox"/> 8/7/2025	<input type="checkbox"/> 8/8/2025
Week 11	<input type="checkbox"/> 8/11/2025	<input type="checkbox"/> 8/12/2025	<input type="checkbox"/> 8/13/2025	<input type="checkbox"/> 8/14/2025	<input type="checkbox"/> 8/15/2025
Week 12	<input type="checkbox"/> 8/18/2025	<input type="checkbox"/> 8/19/2025	<input type="checkbox"/> 8/20/2025	<input type="checkbox"/> 8/21/2025	<input type="checkbox"/> 8/22/2025



Add and/or Cancel Days – To add and/or cancel days, a two-week notice is required.

- Additions and/or cancellations will be submitted through an online link provided on our website.
- Cancellations with less than two weeks' notice: tuition will be billed, no credits or refunds will be issued.
- Additions with less than two weeks' notice will include a 20% upcharge above the normal daily rate. These requests will need approval by the Summer Camp Administrator.

Child(ren) Name(s): _____

Parent/Guardian Name (Print Name): _____

Parent/Guardian Signature (Signature): _____

Date: _____