

Bonnie Academy
Parent's Agreement

Child's Name _____

Parent's Name _____

Home Address _____

Parent/Guardian Email Address _____

Drivers License # _____

Social Security # _____ Day Time Phone _____

E-mail Address: _____

1. Make all payments in advance, i.e. on the Monday of each week. We accept cash, check, money order, or **Master Card & Visa**. A fee of \$20.00 will be charged for any returned check. There will be no refund on tuition fees already paid. Tuition amount may be changed at any time, with 30 days written notice.
2. Should a child be absent for a whole week, half of one week's fees must be paid. Should a child be absent for one or more days in any week, the full fee for the week must be paid.
3. Notify the school of any absences.
4. 2 weeks notice of withdrawal must be given to accommodate new pupils, or payment in lieu must be made.
5. The school will be closed for major holidays and staff training days only. **The tuition for the holiday weeks will not change. The tuition is not negotiable.**
6. Parents must sign their name in full, indicating the time on the IN and Out Register when leaving their child at school and picking their child up from school each day. An authorized individual must be 18 years or older to pick up children from Bonnie Academy.
7. School hours are from 7:00 a.m. to 6:00 p.m. There will be a \$1.00 per minute late fee after 6:00p.m. which the parent must pay on the same day to the teacher on duty.
8. Make sure that your child has spare clothes (diapers and wipes if needed) and make sure that their blankets are taken home to be washed every Friday.
9. If your child needs to take medication during school hours please ask the on duty teacher for an appropriate form.
- 10 Please be advised that DSS has the authority to interview children at Bonnie Academy without prior consent.
11. I agree to abide by all the rules and regulations of Bonnie Academy and confirm that I will encourage my child to adhere to instructions given by the directors and teachers of the school in the interest of my child's safety and the safety of all children.
12. Please be advised that we may take pictures of your child during special events or on special occasions and place them in our online photo album
13. ***My child's photograph may be taken and used for publicity and or advertisements.*** (Please check one)
_____I agree _____I do not agree

Signature _____

DATE _____