

Parental Agreement

Child's name: _____ will attend Dunwoody Baptist Preschool for the 2017-2018 school year.

1. I agree that my child will not be allowed to enter or leave the facility without being escorted by the parent(s), person authorized by parent(s), or preschool personnel.
2. I understand that DBP Forms #1 through # 5 and the #3231 Immunization Form must be completed and returned to the Preschool Office before my child may attend school.
3. I understand that I am required to provide a current email address to the school, and it will be the primary form of communication between the Preschool Office and parents for newsletters, and other communications. I understand that my contact information (names, address, email address and phone numbers, etc.) will be published for distribution on the class lists and in the school directory.
4. I acknowledge that it is my responsibility to keep my child's records current to reflect any significant changes as they occur including home, work, and cell phone numbers, home address, email address, emergency contacts, child's physician, health record, and immunization record, etc.
5. I understand that Dunwoody Baptist Preschool will not administer any medication to my child with the exception of an epi-pen or Benadryl, accompanied by a written doctor's authorization including instructions and written parental consent. In addition, a classroom allergy alert form must be completed. Please discuss any other concerns with the Director.
6. I agree that if my child has a medical emergency, and I have provided the medication and a detailed written and signed doctor's authorization and instructions to the Preschool, that the medication will be administered to my child.
7. I acknowledge that my child may be photographed and/or videotaped by teachers, staff, or the school photographer for school or church use. I may take my own child's pictures/video during school activities but agree to never post or distribute photographs/videos of any other children in the class to any person, organization, or any social media outlet online.
8. I agree to abide by all DBP rules, regulations, and the policies as stated in the Dunwoody Baptist Preschool Parent Handbook with all and any necessary revisions made during the year, and if I fail to follow any of the rules and regulations as stated, then my child will be withdrawn from the Preschool. I also agree that it is my responsibility to provide a nutritious lunch and a classroom snack within the school guidelines.
9. I understand that all payments are first applied to the oldest outstanding invoice, and that all payments are non-transferable and non-refundable. The monthly tuition is not prorated for any reason as the tuition for the school year is divided into 9 monthly payments, September through May, as a courtesy to our parents.
10. I agree to pay the May Tuition for this school year and an Activity Fee, on my child's Visiting Day. If my child registers after the Visiting Day, then I will pay these fees at the time of registration.
11. I agree that the Registration Fee, Activity Fee, May Tuition, and all other applicable and required fees are to be paid in full before the child can attend school. I agree that if my child is withdrawn at any time for any reason, a Reinstatement Fee must be paid each at the time of readmission, within any given school year.
12. I agree, that the monthly tuition is due on the 1st of each month and is to be paid in full irrelevant of the days on which my child attends school. If the tuition is not paid timely, then a late fee will incur as agreed to in the Application for Enrollment and as stated in the Parent Handbook. The late fee will continue to accrue until it (the accrued late fee plus tuition due) is fully paid. I agree in case of extended absence due to trips or illness, the monthly tuition will be paid on time to reserve a place in the class for the child. I agree DBP reserves the right to withdraw the child from school because of non-payment of any fees.
13. I agree, if for the month of April all tuition, fees, assessed and accumulated fees due are not paid in full by April 15 then the child may not attend school thereafter and will be withdrawn from the preschool program for the remaining school year.
14. I agree that in case of illness or accident or some other medical situation where immediate medical attention is required, and in the judgment of the school it is determined that it would be detrimental to the child to delay medical treatment, that I will be responsible for all the costs of the emergency transport and treatment incurred and hereby release Dunwoody Baptist Church and Dunwoody Baptist Preschool from any responsibility or liability for the action taken on behalf of my child.
15. I acknowledge that my child is attending a church preschool program where he or she will be taught they are acceptable and lovable just as God created them, and where the love of learning will be inspired by the nurturing and educating of each child within a Christ-centered environment.

Signed: _____ Date: _____
Parent/Guardian