



Tuition Payment Agreement/Acknowledgement

My child, _____, is enrolled Part Time / Full Time in the Preschool / School Age program at Just Like Home Day Care.

I agree to pay the **weekly** tuition rate of \$_____.

I understand and agree to the above stated tuition payment policy and will notify the center administrator in writing, at least two-weeks in advance, if any schedule changes need to be made.

Parent/Guardian Signature

Date

Photography Consent

I agree that my child listed above may be photographed by staff members employed by Just Like Home Day Care during normal day care hours, field trips, or activities. I understand that these photographs may be used in promoting child care services either in print or on the internet.

I give permission for my child to be photographed, or their images recorded for print or electronic use in promoting child care services. I understand that it is my responsibility to update this form in the event that I no longer wish to authorize the above uses. I agree that this form will remain in effect until I make a written request of change. I understand that there will be no payment for me or my child's participation.

Please respect the following exceptions:

Parent/Guardian Signature

Date

Rachel Wells, Administrator
3580 State Route 43, Kent, OH 44240
Owned & Operated by The Hill Church

330.678.5040 ☎
jlhdaycare.org #
brimfielddaycare@gmail.com ✉