



Little Rascals Clubhouse, LLC

FINANCIAL AGREEMENT

Child's Name _____ Date of Birth _____

Name _____

First

MI

Last

Address _____

Street

Apt #

City

State

Zip

Home Phone _____ Cell Phone _____ Work _____

Social Security # _____ Relationship to child _____

Email _____ Preferred method of contact: Phone or Email

Please read the following information. After you have read this page in its entirety, please sign at the bottom to ensure that you have read and understand the information on this page.

- Automatic bank and credit card drafts for the enrolled child's tuition are processed at 9am on Monday mornings, regardless of bank holidays.
- Weekly, Bi-Weekly or Monthly tuition is billed at a flat rate. No other discounts will be provided based on closures or absences for holidays, illness, weather or any other unforeseeable events. I understand I will be charged the same rate every week whether the enrolled child attends the program or not.
 - I understand I am only allowed ONE excused week of absence per calendar year.
 - **A written notice must be submitted** to the office a week prior or no later than the Thursday prior to any additions/changes to the enrolled child's record/account. If I do not provide advance written notice, I will be charged the regular rate.
- **I am fully responsible for updating changes to my credit/debit card number, expiration and security code or my bank checking/savings information a week or the Thursday prior to my next bank draft date.**
- If payment for tuition or balance is returned or declined, I will be notified immediately and will be assessed a \$25 return-payment fee, and my payment will be due immediately.
- If I do not make my payment in full by the close of business on Friday, the enrolled child will not be allowed to attend the facility until payment is made.
- If the enrolled child is not allowed to attend the program due to non-payment and I do not make payment, I will be referred to a third-party collection agency.
- Please mark when tuition will be paid.
 Weekly Bi-Weekly Monthly

I understand that by signing this form I assume all financial responsibility for this child. Little Rascals Clubhouse, LLC is not responsible for financial disputes between parents/guardians. Any and all financial obligations due for this child will be communicated to me directly by Little Rascals Clubhouse, LLC.

Parent/Guardian Signature _____ Date _____