

## Altoona Campus Family Plus Agreement

Altoona Campus agrees to provide childcare services to the child (ren) listed below in either The Playhouse Nursery or The Youth Area during published hours of childcare operation(s). Said care will be provided on an "unlimited" basis whenever childcare facilities are open for operation. Current hours of operation are Monday through Friday 8:00-12:00 a.m., Monday through Thursday evenings 4:00-8:00 p.m. and Saturday mornings 8:00-12:00 a.m.

Family Plus is available to family, single-parent family and senior family membership households **only**. A **parent/guardian may only include children ages six-weeks to nine years of age whom they claim as legal dependents**.

Parent/Guardian Name (First, MI, Last): \_\_\_\_\_

Home Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_ Home Phone: \_\_\_\_\_

### Children enrolled in Family Plus unlimited childcare:

Name (First, MI, Last): \_\_\_\_\_ D.O.B. \_\_\_\_\_ M / F

Name (First, MI, Last): \_\_\_\_\_ D.O.B. \_\_\_\_\_ M / F

Name (First, MI, Last): \_\_\_\_\_ D.O.B. \_\_\_\_\_ M / F

Name (First, MI, Last): \_\_\_\_\_ D.O.B. \_\_\_\_\_ M / F

Name (First, MI, Last): \_\_\_\_\_ D.O.B. \_\_\_\_\_ M / F

Name (First, MI, Last): \_\_\_\_\_ D.O.B. \_\_\_\_\_ M / F

### Please select a payment option:

\_\_\_\_\_ **Payment in full** at the time of purchase (cash, check, Visa or Mastercard)  
(\$180-one child, \$300-two children, \$360-three or more) **Total Annual Cost** \_\_\_\_\_

\_\_\_\_\_ **Month-to-Month**  
(\$25-one child, \$35-two children, \$45-three or more) **Total Monthly Cost** \_\_\_\_\_

\_\_\_\_\_ **Monthly credit card charge** (1<sup>st</sup> business day of each month)  
(\$17-one child, \$27-two children, \$32-three or more) **Total Annual Cost** \_\_\_\_\_

Name (as it appears on credit card): \_\_\_\_\_ Visa / MasterCard

Account #: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

\_\_\_\_\_ **Monthly EFT** (15<sup>th</sup> business day of each month) **Total Annual Cost** \_\_\_\_\_  
(\$17-one child, \$27-two children, \$32-three or more)

Voided check attached YES/NO

Anniversary Date \_\_\_\_\_

# Altoona Campus Family Plus Agreement

**Please review and initial each statement:**

\_\_\_\_\_ I understand "unlimited childcare" is defined as childcare available in The Playhouse Nursery and/or The Youth Area during published hours of operation for these childcare facilities. I further understand that Altoona Campus Management may, at their discretion, adjust the hours of operations in The Playhouse Nursery and the Youth Area, and that said changes will not affect the terms of this agreement.

\_\_\_\_\_ I understand and agree to remain in the facility or be involved in an Altoona Campus sponsored program whenever my child (ren) is/are placed in the care of The Playhouse Nursery and/or The Youth Area.

\_\_\_\_\_ I have reviewed and agree to the fees associated with my Family Plus Agreement.

\_\_\_\_\_ I understand the fees paid for childcare do not involve any other program, class or service provided by Altoona Campus.

\_\_\_\_\_ Should I cancel my Altoona Campus membership agreement, I understand that I will be charged for 30 days under the terms of this agreement.

\_\_\_\_\_ I understand that Family Plus Agreement paid in full will be refunded based on the calculated unused days of the membership contract beginning 30 days after the receipt of written notification of cancellation.

\_\_\_\_\_ I understand the Altoona Campus Board of Directors may, at their discretion, adjust the monthly rate applicable to my Family Plus plan. I understand that I will receive at least thirty (30) days notice of such changes.

\_\_\_\_\_ I understand that if this service is for an Altoona Campus Program and I am a NON-member, all guidelines above apply.

**Monthly EFT Clients:**

\_\_\_\_\_ I understand this Family Plus agreement is an automatic withdraw of funds from the checking/savings account listed on the attached voided check. All monthly drafts will be performed on the 15<sup>th</sup> business day of the month.

\_\_\_\_\_ I authorize Altoona Campus to initiate debit entries to my account and financial institution indicated on the attached voided check. I acknowledge that the origination of ACH transactions to my account must comply with the provisions of U.S. law. This authority is to remain in full force and effect throughout the term of this agreement.

\_\_\_\_\_ Should my bank for any reason not honor any ACH draft, I understand that I am still responsible for that payment. I further understand that an additional Twenty Dollar (\$20) service fee will be charged for any draft not honored by my bank.

\_\_\_\_\_ I understand that childcare services will be denied in the event that payment is not honored, until the payment due and the \$20 service fee is remitted to Altoona Campus.

**Monthly Credit Card Clients:**

\_\_\_\_\_ I understand this Family Plus agreement is an automatic charge to the credit card listed above. All monthly credit card charges will be processed on the 1<sup>st</sup> business day of the month.

\_\_\_\_\_ I authorize Altoona Campus to initiate recurring charges to my credit card. I acknowledge that these transactions must comply with the provisions of U.S. law. This authority is to remain in full force and effect throughout the term of this agreement.

\_\_\_\_\_ Should my credit card company for any reason not honor any credit card charge, I understand that I am still responsible for that payment. I further understand that an additional Twenty Dollar (\$20) service fee will be assessed for any charge not honored by my credit card company.

\_\_\_\_\_ I understand that childcare services will be denied in the event that payment is not honored, until the payment due and the \$20 service fee is remitted to Altoona Campus.

**I have read, understood and agree to abide by the terms set forth in this agreement:**

\_\_\_\_\_ Signature of parent/guardian \_\_\_\_\_ Date

<b>For Altoona Campus Office Use Only:</b>			
Payment Amount _____	Method of Payment _____	Sales ID _____	Entry ID _____
Anniversary Date _____		Contract terms and conditions reviewed with member: _____	