

Academic Year Contract for 2026-2027



This contract is secured between Precious Years Learning Center, Ltd., 5906 Springdale Rd,

and _____ residing at _____
Parent/Guardian Name Parent/Guardian Street Address

Email address

City, State, and Zip Code



contract term: Aug 17, 2026 through May 21, 2027

Child's Legal Name _____ date of birth ____/____/____	[Nickname, Goes by....] _____	M T W Th F Circle Scheduled Days	\$ _____ Weekly Rate
Child's Legal Name _____ date of birth ____/____/____	[Nickname, Goes by....] _____	M T W Th F Circle Scheduled Days	\$ _____ Weekly Rate
Child's Legal Name _____ date of birth ____/____/____	[Nickname, Goes by....] _____	M T W Th F Circle Scheduled Days	\$ _____ Weekly Rate

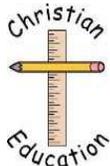
TOTAL DUE WEEKLY
\$ _____

2025-26 Tuition Rates

- 2 days.... \$ 100
- 3 days.... \$ 150
- 4 days.... \$ 200
- 5 days... \$ 250
- 10% prepayment discount
- 10% sibling discount

\$100 Registration Fee required to reserve your days. This is due each academic year per family and is non-refundable.

Closed days are still paid days or you may redeem a vacation coupon for that day.



- Labor Day Sep 7
- Columbus Day..... Oct 12
- Thanksgiving BreakNov 26-27
- Christmas Break.....Dec 21 -25
- New Year's Break..... Dec 31-Jan 1, 2027
- Easter Break..... Mar 26 – Mar 29

Parent Portal Access to Handbook & Emergency Response Plan

User Name:
Passcode:

By signing below, I am agreeing to the contract terms, the school's policies, procedures and the Code of Conduct.

X

Parent/Guardian Signature

date

Program Representative Signature of Acceptance

This is a legal contract. Please keep this with your important documents

RELEASE POLICY

At the end of class or the end of the day, students will **only** be released to a parent, guardian, or other authorized person listed on the release form. The school reserves the right to request picture identification of anyone picking up a child. **The school also reserves the right to withhold the release of any child if proper identification cannot be shown or verified.** We will always withhold the release of any child to **anyone suspected of driving under the influence** or **anyone displaying an inability to safely operate a motor vehicle.**

If you or someone authorized to pick up your child needs assistance due to special needs or circumstances, please notify us so that accommodations can be made.

It is extremely important that your child be picked up on time each day. Late pickup charges will be imposed at the rate of **\$2 per minute** past closing time and are payable to the employee[s] who stayed with your child/children. Late fees not paid to employees will be added to your tuition account balance.

RELEASE AUTHORIZATIONS

My child **may be released** to the following individuals:  **(It is not necessary to list parents or legal guardians)**

Name of adult 18 years or older	Relationship to Child	Child refers to as...
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Name of adult 18 years or older	Relationship to Child	Child refers to as...
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Name of adult 18 years or older	Relationship to Child	Child refers to as...
Name of adult 18 years or older	Relationship to Child	Child refers to as...

****NON-RELEASE STATEMENT****

My child may NOT, under any circumstances, be released to:

Name of adult 18 years or older	Relationship to Child	Child refers to as....
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Due to the following circumstances: _____ **Note:**  ****Any non-custodial parent who is excluded from pickup will be denied. In order for the school to withhold a parent's right to their child, the custodial parent or guardian MUST provide the most recent copy of any custody agreement to be kept in the child's file while attending school. **** 

By signing, I authorize the above people to pick up my child and hold harmless Precious Years Learning Center, Ltd. from any liability arising from the above-named individuals have control, custody and care of my child. I further agree to provide the school with any court papers proving denial of custody to a non-custodial parent in order to exclude said parent from control, custody and care of my child. I FURTHER UNDERSTAND that anyone listed on the release list will be made aware of and adhere to the school's supervision policy and the code of conduct policy.

Signature of Parent/Guardian  _____ Date ____/____/____

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this with your important documents**