

**School Starts Sept. 8**

**Partners in Learning Private Preschool at Northfield**

**A Partners in Learning, Inc. Program**

408 New Road \* Northfield, NJ 08225

609-377-8337

**2020/2021 School Year Extended Childcare Services Registration Form**

*Available for before and after school days; virtual instruction days, school holidays & breaks*

Child's Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Parent's Name: \_\_\_\_\_

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

Home Phone: \_\_\_\_\_ Cell#(s): \_\_\_\_\_

Email address(s): \_\_\_\_\_

How did you hear about PIL@Northfield? \_\_\_\_\_

\*\*\*\*\*

**BeforeCare is only available for students attending the AM session (Mon-Thurs)**

**AfterCare is only available for students attending the PM session (Mon-Thurs)**

**Friday Full-Day Daycare is available to all students**

*Posted schedule and rates apply during current DCF and DOE applicable regulations*

*and are subject to change due to COVID-19 pandemic conditions.*

*We will do our best to notify you if/when conditions require changes from this current schedule.*

**BeforeCare hours 7:00 AM - 9:00 AM - AfterCare hours 4:00 PM - 6:00 PM**

**Friday Daycare hours 7 AM - 6 PM**

**Please check all boxes accordingly**

(Total fees are based on our 10-month school year cycle from September to June)

Check all that apply	Monthly Cost	Yearly Cost	Service	Times of Attendance
<input type="checkbox"/>	\$180	\$1,800	BeforeCare: Monday–Thursday*	Drop Off Time: _____
<input type="checkbox"/>	\$180	\$1,800	AfterCare: Monday-Thursday*	Pick Up Time: _____

\*includes Friday in-class instruction make-up days due to school holiday calendar

**Friday Full-Day Daycare 7am-6pm (and during school breaks/holidays when offered)**

**Up to 5 hours: \$30 per day – Over 5 hours: \$45 per day**

Daycare sign-up forms will be distributed monthly by the OnSite Director

**Registration fee \$75 for one child/\$125 for 2 or more children**

**Please choose from the following payment options:**

\_\_\_\_\_ **Monthly installment payment plan:** Total due in 10 equal payments debited on 9/8/20 and then the 1<sup>st</sup> of each month from 10/1/20 through 6/1/21

\_\_\_\_\_ **Bi-Monthly installment payment plan:** Total due in 20 equal payments debited on the 8<sup>th</sup> & 15<sup>th</sup> of September, and then the 1<sup>st</sup> & 15<sup>th</sup> of each month beginning 10/1/20 through 6/15/21

\_\_\_\_\_ **Daycare ONLY payment plan:** Total due based upon time/number of monthly signup days. Please circle monthly or bi-monthly payments beginning 9/8/20 (and/or 9/8 and 9/15/20)

**Monday thru Thursday School Day Schedule:**

**AM Session: 9am – 12pm \* PM Session: 1pm – 4pm**

## PAYMENT OPTIONS / DIRECT PAYMENT AUTHORIZATION

I authorize Partners in Learning, Inc. (PIL) to initiate electronic debit entries to my:  
(check one)     Checking Account\*                       Savings Account  
for payment of daycare for \_\_\_\_\_ at PIL at Northfield.

**Please choose from the following options for frequency of payment for daycare (including daycare ONLY):**

\_\_\_\_\_ **Monthly installment payment plan (10 equal payments debited on September 8, 2020 and then the 1<sup>st</sup> of each month beginning on October 1, 2020 thru June 1, 2021)**

If you register after September 4, 2020, your payment will be adjusted according to the remaining school calendar and the first installment will be required to be paid via check, cash or money order on your child's first day of school. The remaining installments will be paid via Direct Debit on the first of the month thru June 1, 2021.

\_\_\_\_\_ **Bi-Monthly installment payment plan (20 equal payments debited on the 8<sup>th</sup> and 15<sup>th</sup> of September and then the 1<sup>st</sup> and 15<sup>th</sup> of each month beginning on October 1, 2020 thru June 15, 2021)**

If you register after September 4, 2020, your payment will be adjusted according to the remaining school calendar and the 1st payment will be required to be paid via check, cash or money order on your child's 1st day of school. The remaining installments will be paid via Direct Debit on the 1st and the 15th of the month June 15, 2021.

\*I authorize PIL to initiate ACH debits from the bank account provided below for all payments and understand additional payment for monthly daycare signups will be added to my scheduled payment amount.

\*I understand that the deduction will be taken on the 1<sup>st</sup> of the month or the 1<sup>st</sup> and 15<sup>th</sup> of the month if I choose the bi-monthly payment plan. (with exception of September on the 8<sup>th</sup>)

\*These authorizations will remain in full force and effective until amount due is paid in full, or until Partners in Learning, Inc. has received written notification from me of the termination of my child's enrollment.

Name of Child: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\*In the event that the 1<sup>st</sup> of the month falls on a weekend or banking holiday, your payment will be deducted on the next business day. I authorize PIL to withdraw additional amounts for attendance during daycare days on the next regularly-scheduled payment date from daycare attendance. I acknowledge that the origination of ACH transactions to my account must comply with the provisions of U.S. law. This authority will remain in effect until I have cancelled it in writing. I agree to notify PIL immediately regarding any change to my bank account information. I understand that if funds are not available at the scheduled time of withdraw, a \$10 late fee will apply as well as a \$20 non-sufficient funds fee-per occurrence. These amounts will be charged to my account and added to my next regularly-scheduled payment. I understand that if my child's schedule changes resulting in a revised payment amount, my scheduled withdrawal amount will change as a result. PIL will notify you of the change in advance before the withdrawal is processed.

NAME(S) ON BANK ACCOUNT \_\_\_\_\_

FINANCIAL INSTITUTION NAME (PLEASE PRINT) \_\_\_\_\_

FINANCIAL INSTITUTION ROUTING NUMBER \_\_\_\_\_

ACCOUNT NUMBER AT FINANCIAL INSTITUTION \_\_\_\_\_

FINANCIAL INSTITUTION CITY AND STATE \_\_\_\_\_

**SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_\_

**\*for checking accounts, please attach a voided check** – if voided check is not attached, upon initial setup of your account please note that we may make a small (few cents) deposit to your account to verify the accuracy of the bank account information before the initial debit from your account.

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**Payment Disclosures**

**Child's Name:** \_\_\_\_\_

*Please Initial  
each line*

\_\_\_\_\_ Amount due is based upon our school year cycle from September thru June, which can be paid in monthly or bi-monthly payments. **I understand it is not based on monthly attendance.\***

\_\_\_\_\_ Amount due will be **ACH debited** starting on September 8, 2020. All remaining payments will be withdrawn every month thereafter until June, 2021.\*

\_\_\_\_\_ I understand an additional amount for monthly daycare signups will be added to my scheduled monthly or bi-monthly payment amount for the month's attendance. For example, if my child is signed up for 2 Friday full-day daycare days in September, on a *monthly* payment plan \$90 will be added to my 9/8/20 payment. Only a *bi-monthly* payment plan, \$45 will be added to each 9/8 and 9/15 payment.

\_\_\_\_\_ If I register my child after September 4, 2020, I understand that my payment amount will be adjusted according to the remaining number of payments in the school year to ensure that my last payment will be in June, 2021.\*

\_\_\_\_\_ I understand that if funds are not available at the scheduled time of withdraw, a \$10 late fee will apply as well as a \$20 non-sufficient funds fee-per occurrence (an amount charged to PIL from our bank). These amounts will be charged to my account and added to my next regularly-scheduled payment due.

\_\_\_\_\_ I understand that if my child's schedule changes resulting in a revised payment amount, my scheduled withdrawal amount will also change. Partners in Learning, Inc. will notify me at least 10 days in advance of any change.

\_\_\_\_\_ No deductions can be made for absences due to illness, vacations or school closures. Deductions for school holidays/vacations have been incorporated into the monthly fees.

\_\_\_\_\_ I understand that if I withdraw my child from the program, I must give at least 2 weeks written notice. If I withdraw my child without notice or with less than 2 weeks notice, I will be charged for fees that are due on the first of the month that my child leaves the program (or the 1<sup>st</sup> and 15<sup>th</sup> of the month if I have chosen the bi-monthly payment plan).

Parent Signature: \_\_\_\_\_

Date: \_\_\_\_\_

\* *subject to change due to COVID-19 pandemic conditions*