

KINDERLAND PRESCHOOL AND DAYCARE

TRANSPORTATION ENROLLMENT FORM

Name of Student: _____ School Name: _____

School Address: _____ Phone Number () _____

School Start Time: _____ School End Time: _____ Grade: _____ Room: _____

Drop Off/ Pick Up Location: _____ Teacher's Name: _____

Effective Date: _____ Special Instructions: _____

Please read each statement and initial next to it.

I, _____, authorize Kinderland to transport my child as stated above. _____
Parent's Name

I understand that the weekly charge for Before / After School care is \$ _____ and I will be billed in advance. _____

I understand and agree that Kinderland reserves the right to immediately stop providing service if I do not pay in advance or if my account becomes past due. _____

I agree to inform the daycare two weeks in advance whenever my child will not attend the daycare or will not need to be transported. _____

I agree to pay a \$ 5.00 charge for every instance that the daycare attempts to pick up my child at school and he/she is not there. _____

I agree that I am responsible for all other applicable charges, as stated in our Rates and Payment Policy. _____

I agree that I am not entitled to any refund for any services that I am billed in advance. _____

I understand that Kinderland can dis-enroll my child at any time for behavior that poses a danger to himself/ herself or others.

I understand that my child must VOLUNTARILY board Company vehicles. The daycare will not force any child to be transported. **It is the parent's responsibility to determine that their child is physically and developmentally capable of being transported.** _____

Parent Signature

Date