

Parental Agreement

Child's name: _____ will attend Dunwoody Baptist Preschool for the 2023-2024 school year.

1. I agree that my child will not be allowed to enter or leave the facility without being escorted by the parent(s), person authorized by parent(s), or preschool personnel.
2. I agree that DBP Forms #1 through #4 and the #3231 Immunization Form must be completed and returned to the Preschool Office before my child may attend school.
3. I agree, through the online parent portal, to keep all contact and other information current at all times including, the current email address, which will be the primary form of communication between the Preschool Office and parents for newsletters, and other communications. I understand that my contact information (names, address, email address and phone numbers, etc.) will be published for distribution on the class lists and in the online school directory.
4. I agree that my child may be photographed and/or videotaped by teachers, staff, or the school photographer for school or church use. I may take my own child's pictures/video during school activities but agree to never post or distribute photographs/videos of any other children in the class to any person, organization, or any social media outlet online.
5. I understand that Dunwoody Baptist Preschool will not administer any medication to my child with the exception of an epi-pen or Benadryl, accompanied by a written doctor's authorization including instructions and written parental consent. In addition, a classroom allergy alert form must be completed. Please discuss any other concerns with the Director.
6. I agree that if my child has a medical emergency, and I have provided the medication and a detailed written and signed doctor's authorization and instructions to the Preschool, that the medication will be administered to my child.
7. I agree to abide by all DBP rules, regulations, and the policies as stated in the Dunwoody Baptist Preschool documents along with any, and all necessary revisions made during the school year. I also agree that it is my responsibility to provide a nutritious lunch and a classroom snack within the school guidelines. No invoices or reminders are sent to the parents for any dues.
8. I agree to timely remit all DBP tuition and fee payments due at all times through the Parent Portal Online Payment System according to the school rules, regulations deadlines as declared, and according to the Monthly Tuition Installment Payment Schedule, or will incur DBP assessments.
9. I agree to always pay the minimum amount of \$50.00 or more through the online payment system, otherwise I will incur for noncompliance.
10. I agree to timely pay the Tuition and prepay any expected fee charges for the month in full on the 1st of each month irrelevant of my child's attendance in school, extended absence due to any trip, or illness, otherwise a late fee according to the school rules will be assessed. There is no refund given for short-term or long-term absences from school. The monthly tuition is not prorated for any reason. I agree all payments are applied from the oldest to the newest outstanding invoice issued, irrelevant of the particular child within each DBP family.
11. I agree if the current month's tuition is not paid by the said monthly deadline, thereafter a \$25 late fee is assessed against the family's account, and is to be paid immediately in full along with the principal balance due. No emails regarding the issuance of the late fee invoices will be issued. If a full Tuition Installment payment due is not received by the 15th of the said month, an additional 2nd late fee of \$25 will be applied to the family account and all the child(ren) in the family will not be permitted to attend school thereafter until the payment is made in full. If all tuition and fees due are not remitted in full to the preschool office by the last school day for the said month, then it will result in the parent's forfeiture of commitment to pay the fees timely, and the child(ren) will be withdrawn from DBP.
12. I agree, at the time of Enrollment, a Registration Fee, Activity/Technology Fee, all required monthly Tuitions are paid in full payment, and must accompany my child's Application for Enrollment according to the school rules, before my child may attend the DBP classes. All payments are first applied to the oldest outstanding family invoice, and all payments and prepayments are non-transferable & non-refundable. My child may not attend any class unless all outstanding fees are paid in full before the start of school.
13. I agree to reserve my child's Extended Day stay prior to the day of stay. Failure to make reservations prior to the day of stay, each stay will be at a charge of \$15/child/day for requests received late, on the day of, irrelevant of the enrichment class enrollment, or circumstances. Failing to reserve my child's stay for Extended Day may result in my child not being able to stay on the day of the request.
14. I agree to prepay on the 1st of each month for all expected Early Morning Stays and Extended Day stays for a given month, or will be assessed a late fee of \$5/transaction the same day for not having a prepayment on file to pay the issued invoice.
15. I agree to submit receipt requests for childcare Tax credits and Flexible Spending accounts in writing or email at mkumari@dbc.org to the Director of Finance, in the Preschool Financial Office stating the type of payment/s and the period (beginning and the ending months) to be reflected on the receipt. There is at least a one-week turnaround period from the time of request during the active school days, and more during school holidays.
16. I agree that DBP reserves the right to withdraw the child from school at any time because of any cause and/or reason it deems appropriate.
17. I agree if my child is withdrawn at any time for any reason, the child is not guaranteed to be reinstated in the same class as before leaving DBP. A child is reinstated on availability, and a Reinstatement fee and all other unpaid dues must be fully paid-up at the time of readmission, within each given school year.
18. I agree that in case of illness or accident or some other medical situation where immediate medical attention is required, and in the judgment of the school it is determined that it would be detrimental to the child to delay medical treatment, that I will be responsible for all the costs of the emergency transport and treatment incurred and hereby release Dunwoody Baptist Church and Dunwoody Baptist Preschool from any responsibility or liability for the action taken on behalf of my child.
19. I acknowledge that my child is attending a church preschool program where he or she will be taught they are acceptable and lovable just as God created them, and where the love of learning will be inspired by the nurturing and educating of each child within a Christ-centered environment.

Signed: _____ Date: _____