



Sacred Heart Early Childhood Center

32245 St. Joe Road, Dade City, FL 33525 Telephone 352-588-4060, Fax 352-588-4871

Children Are Our Ministry - Infants to 12 years

License#C06PA0062

www.sacredheartecc.com

e-mail director@sacredheartecc.com

2019-2020 REGISTRATION FORM

Child's Name _____ Date of Birth _____ Sex M F
(Last - First - Middle) (Nickname)

Address _____
(Street - City - State - Zip)

Date of Enrollment: _____ / Re-enrollment: _____
Enrollment Days: M T W T F Primary Hours of Care: _____

If your child in not going to attend or is going to be more than an hour late, you must inform SHECC of these changes.

VPK with wrap-around VPK only Am Pm Full Day Before and/or After School

Marital Status of Parents: Married / Separated / Divorced / If Divorced, a copy of the custody agreement must be provided.

Student lives with: Both parents / Mother / Father / Other _____

Mother/Guardian's Name: _____

Father/Guardian's Name: _____

Address: _____

Address: _____

Home & Cell #: _____

Home & Cell #: _____

Email: _____

Email: _____

Employer: _____

Employer: _____

Work Address: _____

Work Address: _____

Work Phone: _____

Work Phone: _____

EMERGENCY CONTACTS:

Child will be released only to the custodial parent or legal guardian and the persons listed below. The following people will also be contacted and are authorized to remove the child from the facility in case of illness, accident or emergency, if for some reason, the custodial parent or legal guardian cannot be reached.

Name & Address	Relationship	Home Phone	Cell Phone
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

During the school year, your child may participate in the recorded, edited, reproduced, and distributed audio, video, or still imaging recordings that involve the use of students' names, likenesses and/or voices. Such productions may be used for educational or exhibition purposes by Sacred Heart Early Childhood Center and the Diocese of St Petersburg in perpetuity and may be copied, copyrighted, edited and distributed by SHECC and the Diocese in perpetuity unless said consent is revoked in writing.

News media, including representatives of television, radio, newspapers and magazines, also often are permitted on school property and may take notes, still photos, sound recordings and/or moving pictures that may include your child. These items may appear or be used in news or feature stories by any media format.

You have the right to object to the use of your child's name, likeness and/or voice in these productions and may do so by indicating below. If you have any questions, please contact the school office at: 352-588-4060.

I / We, the undersigned, _____ do/ _____ do not, hereby consent that: Sacred Heart Early Childhood Center and the Diocese may use the name, likeness and/or voice of my child for school website, news releases, media and promotional activities. This consent is renewed at the beginning of each school year unless rescinded in writing. If you have indicated "do not" above, but would like your child to be on SHECC's closed Facebook page, please initial, _____.



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2019-2020 Tuition Contractual Agreement

This Agreement is made by and between Sacred Heart Early Childhood Center and _____, parent/guardian of _____. The following has been agreed upon between the two parties:

Tuition payment Procedures:

Family Rates: Discount applies for families with two or more siblings. Discount applies to tuition only. Families with subsidized care are not eligible for discount.

Other children in the home attending SHECC. _____

Parishioner Discount: A 5% discount is available for registered and supporting Sacred Heart Catholic Church parishioners. Discount applies to tuition only. Families with subsidized care are not eligible for discount. The parish priest must complete a subsidy form (obtained from Business Manager). See handbook for further details.

Registration fee: Registration fees are due annually and are non-refundable. They are due July 1st and expire June 30th. The rates are as follows: One child \$75.00, Family \$150.00, Summer only \$40.00.

Initial beside each statement below indicating that you understand and agree to follow the policies stated.

Rates are calculated on an adult to child ratio, NOT necessarily the age of the child. All terms and payment procedures apply. Full tuition payments are due throughout the year, regardless of absences, including, but not limited to vacation, illness, holidays, or weather closings.

_____ (parent or guardian initials)

Prearranged extended care hours are from 5:30 p.m. until 6:00 p.m. at an additional cost of \$10.00 weekly. All children must be picked up by 6:00 p.m. A late fee of \$3.00 per child, per five minutes applies to children picked up after 5:30 p.m. and who are not registered in the prearranged extended care hours. After 6:00 p.m., a late fee of \$10.00 per child, per five minutes applies. No discounts apply.

_____ (parent or guardian initials)

I have read and agree to the full contents of the SHECC Parent Handbook. I understand that disregarding these policies can result in termination from child care enrollment.

_____ (parent or guardian initials)

I understand that this agreement shall be in effect until which time parent/guardian or SHECC has given termination notice in accordance to the Parent Handbook policy, or upon re-enrollment at the beginning of each fiscal year, at which time a new Tuition Contractual Agreement must be signed.

_____ (parent or guardian initials)

VPK (Voluntary Pre-Kindergarten Rates)

For those children enrolled in our VPK program, on those days only and that come from 9:00 a.m. to 12:00 p.m., there is no charge to the parents. We do offer a half-day wrap around program for those children that arrive before 9:00 a.m. and/or need care after 12:00 p.m. The rate for this is printed on the back side of this form. Daily Rate applies for all non VPK days. VPK parents, please mark full day on the Tuition Contractual Agreement and note VPK under the tuition plan you choose.

The State of Florida will pay in full the tuition for your child to attend 540 hours per year, 3.00 hours per day, 5 days per week as long as your child does not exceed 20% in absences in any given month. Children with excessive absences may be terminated from the program.

_____ (parent or guardian initials)

ELC (Early Learning Coalition)

For families that qualify, ELC of Pasco and Hernando Counties, Inc., will pay their approved daily rate for tuition for your child less parent fees. Unexcused absences will not be paid by ELC and remain the responsibility of the parent. If eligibility is terminated, full tuition applies.

_____ (parent or guardian initials)

2019 – 2020 Tuition Rates

My child _____, DOB _____, will be attending SHECC during the 2019-2020 school year. Start Date _____ Re-enrollment _____
 _____ VPK only _____ AM Only _____ PM Only _____ Full Day Only on these days M T W R F

The tuition plan I choose is: \$ _____ monthly. Monthly payments are due by the 7th.
 \$ _____ weekly. Weekly payments are due on Monday.

Finance charges will be accessed for delinquent payments. See Parent Handbook for details.

INFANTS		Days must be the same each week.	ONES		2 YEAR OLDS & PRESCHOOL I		PRESCHOOL II / VPK Holiday & Summer		VPK with Wrap-around		Before AND After School	
Weekly	Monthly		Weekly	Monthly	Weekly	Monthly	Weekly	Monthly	Weekly	Monthly	Weekly	Monthly
\$185.00	\$763.00	5 days	\$173.00	\$713.00	\$161.00	\$661.00	\$149.00	\$615.00	\$100.00	\$411.00	\$70.00	\$288.00
165.00	679.00	4 days	160.00	657.00	134.00	551.00	125.00	513.00	85.00	352.00	61.00	251.00
134.00	551.00	3 days	129.00	530.00	108.00	445.00	103.00	424.00	70.00	288.00	52.00	214.00
103.00	424.00	2 days	98.00	402.00	82.00	339.00	77.00	318.00	54.00	220.00	43.00	177.00
67.00	276.00	1 day	62.00	258.00	57.00	233.00	52.00	212.00	36.00	148.00	30.00	123.00
		PART TIME							VPK Before care (6:30-9:00)		Before OR After School	
n/a	n/a	5- ½ days	\$124.00	\$509.00	\$111.00	\$458.00	\$100.00	\$411.00	\$57.00	\$233.00	\$55.00	\$226.00
n/a	n/a	4- ½ days	103.00	424.00	93.00	381.00	85.00	352.00	46.00	191.00	45.00	185.00
n/a	n/a	3- ½ days	85.00	352.00	74.00	305.00	70.00	288.00	36.00	148.00	35.00	144.00
n/a	n/a	2- ½ days	67.00	276.00	57.00	233.00	54.00	220.00	26.00	106.00	25.00	103.00
n/a	n/a	1- ½ day	n/a	n/a	n/a	n/a	36.00	148.00	21.00	84.00	20.00	82.00

Elementary & Middle School Age Rates

Middle school before and after care is available for those children that have attended our center throughout elementary school.

SCHOOL AGE CHILDREN	WEEKLY
Daily Rate: School Holiday & SAS ½ day (This is available to students who attend Before and/or After School full-time. This rate is in addition to your regular tuition.)	\$20.00
Drop in student School Holiday	35.00/ day
School Age Full Time Care (No School) 3 Days	97.00
School Age Full Time Care (No School) 4 Days	117.00
School Age Full Time Care (No School) 5 Days	140.00

Extended Care (Until 6:00 pm)	\$10.00 per week, per child
Late Pick-Up fee	\$3.00 per 5 minutes past 5:30. After 6:00, \$10.00 per 5 minutes. (Rate is per child)
VPK only- Early Drop off/Late Pick-up fee	\$3.00 per 5 minutes prior to 8:45 a.m. and after 12:45 p.m. After 30 minutes a \$10.00 per 5 minute fee will apply.
Non-Notification Fee	\$3.00 per offense

***SHECC reserves the right to change tuition rates or placement criteria at any time due to economic conditions.**

I have read the contractual agreement regarding tuition payment procedures and hereby agree to abide by them. I understand that a two (2) weeks notice is required when withdrawing my child/ren. All tuition is to be paid in full by the last day of care. Signature of both parents is required.

Parent or Guardian (Signature)

Parent or Guardian (Signature)

Date

Parent or Guardian (Printed Name)

Parent or Guardian (Printed Name)

Driver's License Number

Driver's License Number

Address

Address

Email Address and Phone Number

Email Address and Phone Number

Fr. Krzysztof Gazdowicz

Pastor- Rev. Krzysztof Gazdowicz

Lucinda O'Quinn

Director- Lucinda O'Quinn