



PARENT AGREEMENT

Tots and Twos families - please rank your session preference (1 for first choice, 2 for second choice). In the event that your first choice session is full and you do NOT want to enroll in the other session, be sure to indicate this in the space provided. Please complete one form per child.

I agree to enroll in Queen Anne Cooperative Preschool's

___ Tots Morning (Session A)	Fri 9:00-10:30	Teacher: Linda Capps	\$60/month
___ Tots Afternoon (Session B)	Mon 3:30-5:00	Teacher: To be hired	\$60/month
___ Twos Morning (Session A)	T/Th 9:30-11:30	Teacher: Linda Capps	\$95/month
___ Twos Afternoon (Session B)	T/Th 3:30-5:30	Teacher: To be hired	\$95/month
___ Threes	M/W 9:20-11:50, F 10:45-1:15	Teacher: Linda Capps	\$150/month
___ Fours	M/T/W/Th 12:00-3:00	Teacher: Linda Capps	\$195/month

_____ whose birth date is _____.

(child's name)

If my first choice is not available, return my registration materials and do not enroll my child _____ (initial here)

Queen Anne Cooperative Preschool is an affiliate of the Seattle Central Community College Parent Education Program and operates under uniform bylaws. I understand that it is my responsibility to read these bylaws and meet the membership requirements of said bylaws. I understand that I am also responsible for:

1. Completing all required forms upon enrollment.
2. Attending mandatory meetings, including Orientation (not applicable for parents joining mid-year) and monthly parent meetings in accordance with the policies outlined in the Parent Handbook.
3. Working in the classroom as scheduled and in accordance with the QACP philosophy.
4. Being punctual on my workday and at the end of each class day to pick up my child.
5. Providing snack for the class on a rotating basis.
6. Holding a board position, all-school job or class job.
7. Participating in all fundraising events.
8. Paying tuition for my class which is \$_____per month, a \$50 annual registration fee (\$25 for additional children) and other fees in accordance with the policies outlined in the Parent Handbook. I understand that all payments are non-refundable.
9. Supporting the health and safety guidelines in the Risk Management and Parent Handbooks.
10. Participating in preschool cleaning efforts.

I understand that this is a cooperatively organized preschool and that I am responsible for participating in a way that reflects my concern for the well being of the whole group.

Indemnity

I agree to indemnify and hold Queen Anne Cooperative Preschool, its directors, officers, agents, employees, and assigns harmless from any claim or action which may arise in connection with this agreement and with my family's participation in Queen Anne Cooperative Preschool except claim of or actions for gross negligence and willful misconduct.

Parents' Names (please print) _____

Address _____

Telephone _____

Email _____

Signature _____ Date _____