



Providing high quality care and play-based education since 1968

Dear Family;

Thank you for your interest in **Montgomery Child Care Association Inc.'s (MCCA) Summer Adventures at Kensington/Forest Glen**. We are looking forward to having your child attend our program. Attached is the 2018 Summer Adventures registration form. Summer Adventures at Kensington/Forest Glen is located at 9805 Dameron Drive, Silver Spring, MD 20902 and is open from 6:30am to 6:00pm. (A late room option until 6:30pm is available for an additional fee).

The 2018 Summer Adventures Program covers an eleven week period running from Monday, June 18 to Thursday, August 30, 2018. You may sign up for any number of weeks. These weeks may be subject to change due to school year adjustments by MCPS. The weekly tuition rate is \$325.00; weeks with four days will have a tuition rate of \$305.00. A non-refundable \$50.00 Registration Fee is due upon registration and a one week tuition deposit of \$325.00 is by May 1, 2018 to secure your space.

The registration and tuition deposit payments may be paid by check, bank draft or credit card. The tuition deposit portion of the payment will be applied to the final week of Summer Adventures registered.

Tuition for the Summer Adventures Program will be billed monthly based on your selection of weeks.

Payment for weeks 1-2 is due June 1

Payment for weeks 3-7 is due July 1

Payment for weeks 8-11 is due August 1

Please note: No child may attend MCCA Summer Adventures if payment for registered weeks has not been received.

To register, please complete a separate Registration form and Registration Fee for each child. Sign page 1 of the attached contract for billing information and page 2 agreeing to the terms and conditions. Return the completed form and your initial payment (check, bank draft, or credit card) to the Kensington/Forest Glen Director at:

Montgomery Child Care Assoc., Inc.
Attn:Summer Adventures
9805 Dameron Avenue
Silver Spring, MD 20902

If you wish to have your payment charged to your bank or credit card account automatically each month, please include the account information on the following page in the **Payment Method** section and check the appropriate box on at the bottom of the last page of the contract. The account information in the **Payment Method** section will also be used for the deposit and registration fee unless otherwise indicated. You will receive a confirmation email with a copy of your contract within two weeks of your forms being received at the MCCA administrative office. You will also receive a welcome packet with additional information and required enrollment forms prior to the start of your session. Enrollment forms may be found on our website: http://www.mccaedu.org/family_resources_enrollment.html.

For further information regarding the program and required forms, please contact the Center Director, Kathryn Lin at 301-593-9641. Information regarding billing can be obtained by contacting the MCCA Administrative offices at 240-428-7717.



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2018 Summer Adventures Registration Form - KENSINGTON/FOREST GLEN

Child's First Name _____ Last Name _____

Gender: M ___ F ___ Date of Birth ___/___/___ Entering Grade (Fall 2018) _____

Returning MCCA Family? YES ___ NO ___ If No, how did you hear about us? _____

Billing Information:

Parent/ Guardian's First Name _____ Last Name _____ Parent/ Guardian's First Name _____ Last Name _____

Email _____ Email _____

Phone _____ Home ___ Cell ___ Phone _____ Home ___ Cell ___

Address _____ Address _____

City _____ State _____ Zip Code _____ City _____ State _____ Zip Code _____

Parent/Guardian's Signature _____ Parent/Guardian's Signature _____

Date _____ Date _____

Place an "X" on desired weeks and calculate cost for child listed above:

Week 1 June 18-22	Week 2 June 25-29	Week 3 July 2-6	Week 4 July 9-13	Week 5 July 16-20	Week 6 July 23-27	Week 7 Jul 30 Aug 3	Week 8 Aug 6-10	Week 9 Aug 13-17	Week 10 Aug 20-24	Week 11 Aug 27-30	Total # of Weeks	Rate per week	Total Tuition Cost
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	\$325	\$ _____
<p>*Receive a \$20 Discount for Week 3 – Apply discount on this line in the box on the far right</p> <p>**Receive a \$20 Discount for Week 11 – Apply discount on this line in the box on the far right</p> <p>Note: The program will be closed on July 4th and August 31st in 2018</p>											Registration Fee	+ \$50	
											Week 3 Discount	-\$ _____	
											Week 11 Discount	-\$ _____	
											Total Cost	= \$ _____	

Holy Cross Hospital Employee? Yes ___ No ___ Interested in Late Room Option? Yes ___ No ___ (if yes, you will receive additional information about rates)

Payment Due to Secure Your Space:

Registration Fee (due at registration)	\$50.00
Deposit (one week's tuition due by May 1)	+\$325.00
Total Due to Secure Your Space	= \$375.00

Payment Method	<input type="checkbox"/> Payment Enclosed
	<input type="checkbox"/> Charge to: Visa ___ Mastercard ___
	Account # _____ Exp. Date _____



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Summer Adventures Program Terms and Conditions:

One week's tuition deposit (\$325.00) and the nonrefundable Registration Fee (\$50.00) are due no later than May 1, 2018 in order to secure a space. Space will not be held without payment. Tuition Deposits will be applied to the final week of Summer Adventures. Locations and weeks are subject to change and/or cancellation at MCCA's sole discretion. No refunds for absences, cancellations or voluntary withdrawals will be made.

Payment must be received prior to the start of the selected week(s) and all required forms must be completed and received by MCCA prior to participation. No child may participate in the Summer Adventures program without properly completed forms on file.

MCCA reserves the right to close registration for full sessions and cancel under-enrolled sessions. Changes to confirmed enrollment after May 1, 2018 may be accommodated on a space available basis at management's discretion and refunds will not be provided for dropped weeks.

Late pick up will be subject to additional fees per MCCA's late pick up policy as provided in the registration packet. A \$30.00 fee will be assessed for any returned check.

I (we) give permission for MCCA to use any photos/video taken during the Summer Adventures program in which myself (we) or my (our) child may appear. MCCA is further given permission to use these photos/videos in print (on advertisements or marketing materials) or on the MCCA website (www.mccaedu.org) or other MCCA affiliated or sponsored websites or materials.

I (we) understand that MCCA engages outside professionals to advise on child development issues and I/we give permission to MCCA to seek outside advice concerning my child's development or behavior.

I (we) authorize and consent to our child's participation in all off-grounds activities such as excursions, picnics, swimming, and visits to institutions. I (we) assume the risk to my (our) child that may occur transporting my (our) child to and from activities as well as while the child is engaged in activities on-site. I (we) agree to release and hold harmless Montgomery Child Care Association, its board, staff and volunteers from any and all claims, costs, suits, actions, judgments, and expenses arising from my (our) child's transportation to and from and participation in these activities.

By executing this agreement, the undersigned agree(s) to abide the rules and regulations, as may be adopted or amended from time to time, by MCCA. Parents/Guardian(s) understand that MCCA believes that a positive and constructive working relationship between MCCA and a participant's family is essential to the fulfillment of MCCA's mission. MCCA reserves the right to suspend or terminate child care if MCCA reasonably concludes that the actions of the parents/guardian(s) are inconsistent with such a positive and constructive relationship or seriously interfere with MCCA's accomplishment of its mission.

The undersigned acknowledge(s) that the execution of this Registration Form is not contingent upon any particular program, curriculum, employee or enrollment level and understand(s) that MCCA retains the right to change its programs, curriculum or workforce at any time at its discretion.

A copy of the Dept. of Human Resources Code of MD> Reg. 07.04.02 Child Care Center Licensing Manual is available on site. A copy of the DHR/CCA publication, A Parent's Guide To Regulated Child Care is available on-site and the MCCA Administrative Office.

This agreement represents the full and complete agreement between MCCA and the parent(s)/legal guardian(s) and any others responsible for payment of registration costs and fees. This agreement supersedes all prior negotiations, agreements, terms, conditions, statement, or representations, whether written or oral. This agreement shall be governed by the laws in the State of Maryland.

Agreed and accepted:

Parent/Guardian's Signature _____ Date _____

Parent/Guardian's Signature _____ Date _____

By MCCA: _____ Date _____

EZ EFT Enrollment Authorization

I choose to register the credit card listed in **Payment Method** in the EZ EFT payment program YES ___ NO ___

By checking YES above, I authorize my financial institution to make my payment on my behalf from the credit card listed above and transfer it to Montgomery Child Care Association, Inc. on the day that it is due. I understand that I am in full control of my payment, and if at any time I decide to make any changes or discontinue this service, I will notify Montgomery Child Care Association, Inc.

Change of payment method will not affect the terms of my contract.