



PAYMENT AGREEMENT FOR CHILD CARE SERVICES

This Payment Agreement ("Agreement") is entered into between Oakland Early Learning Center ("Center") and the undersigned Parent/Guardian.

ACCOUNT INFORMATION

Child(ren)'s Name(s): _____

Parent/Guardian Name: _____

Email Address (Required): _____

Past Due Balance: \$ _____

PAYMENT TERMS

The Parent/Guardian acknowledges that the above-referenced account is past due. In order for the child(ren) to remain enrolled, the Parent/Guardian agrees to the following terms:

- I. **Weekly Payment Toward Past Due Balance.** Beginning on _____, Parent/Guardian agrees to pay \$_____ per week toward the past due balance.
- II. **Ongoing Tuition Requirement.** All current and future weekly tuition must be paid in full and on time. The weekly payment toward the past due balance is in addition to regular tuition.
- III. **Payment Due Date.** All payments are due each week on Monday by 4:00 p.m.
- IV. **Late Payments.** Any payment not received by Monday at 4:00 p.m. will be considered late and a \$20 late fee will be applied to the account.
- V. **No Grace Period.** There is no grace period.
- VI. **Default.** Failure to comply with this Agreement may result in immediate suspension or termination of childcare services and may result in additional collection actions.

AUTHORIZATION

I authorize Oakland Early Learning Center to charge the payment method listed below for the amounts and schedule outlined in this Agreement.

Cardholder Name: _____

Card Number: _____

Expiration Date: _____ Security Code: _____

ACKNOWLEDGMENT AND SIGNATURE

By signing below, I acknowledge that I have read, understand, and agree to the terms of this Agreement.

Parent/Guardian Signature: _____

Date: _____

Center Representative Signature: _____

Date: _____