

GAARDE CHRISTIAN DAYCARE

2024 - 2025 PRICING INFORMATION SHEET

At Gaarde Christian Daycare, we are excited about the upcoming school year. We are devoted to providing quality care and education for those we are privileged to serve. Below you will find the pricing information for the upcoming school year. Daycare students must be of age (3-12) by September 1st, potty trained (no pull-ups), and must not need assistance when using the bathroom. Please note that we have limited openings. A registration form and schedule must be on file before care can be provided. Forms are available online, in the Daycare office or in the Front Office of Faith Journey Church. Thank you for considering Gaarde Christian Daycare.

BEFORE CARE - \$7.50/DAY

7:00 - 8:10 AM

Ages: 3 & 4 years old (registered for GCDC Preschool)
K - 12 years old

PRESCHOOL CLASS - \$3,600 - ANNUAL TUITION

8:10 - 11:45 AM

Ages: 3 & 4 years old

AFTER CARE Ages: 3 & 4 years old | K - 12 years old

AC 1 11:45A - 3:00P		AC 2 3:00 - 6:00P		AC 3 11:45A - 6:00P	
2 Days / Week	\$ 45	2 Days / Week	\$ 45	2 Days / Week	\$ 75
3 Days / Week	\$ 67.50	3 Days / Week	\$ 67.50	3 Days / Week	\$ 112.50
5 Days / Week	\$ 112.50	5 Days / Week	\$ 112.50	5 Days / Week	\$ 187.50

FEES & PAYMENTS

- There will be an enrollment fee of \$200 due at the time of registration.
- After Care is priced as a flat rate per week (no. of days depend on option selected).
- Annual invoices will be prepared based on the options above that are selected. If you choose to pay the full year upfront, a 4% discount will be applied. Otherwise, a monthly payment plan will be created. Payments are due on the 1st of each month for that month's care.
- Based on availability, you may be able add a day of After Care to your selected option. There is an upcharge (prorated for the option selected) for that add-on which will be reflected on the following month's invoice.
- Late pickup charges will result in a \$10 charge for the first 10 minutes, and a \$15 charge for each 5 minute period thereafter.
- Payments are due regardless of child's attendance. However, each child enrolled in Before or After Care will be afforded the number of days reflected on their scheduled weekly attendance for the school year as an excused absence which will be credited to their account if used.
- Early Withdrawal from Preschool will result in \$500 withdrawal fee.
- Accounts past due can result in suspension of daycare use until account is current.

If you have any questions, please reach out to the GCDC Director,
Shannon Pruski - daycare@gaardechristian.com | 503-639-5336

GAARDE CHRISTIAN DAYCARE 2024 - 2025 SCHEDULE FORM

Student Name: _____ Parent Name: _____

Phone: _____ Start Date: _____

BEFORE CARE - \$7.50/DAY | 7:00 - 8:10A (check all days desired)

M T W TH F

PRESCHOOL CLASS - \$3,600 - ANNUAL TUITION

8:10 - 11:45 AM

Ages: 3 & 4 years old

please check
to enroll

AFTER CARE - COST VARIES PER OPTION Ages: 3 & 4 years old | K - 12 years old

AC 1

11:45A - 3:00P

Please select choice of days
within your selected option below

2 Days / Week

M T W TH F

3 Days / Week

M T W TH F

5 Days / Week

AC 2

3:00 - 6:00P

Please select choice of days
within your selected option below

2 Days / Week

M T W TH F

3 Days / Week

M T W TH F

5 Days / Week

AC 3

11:45A - 6:00P

Please select choice of days
within your selected option below

2 Days / Week

M T W TH F

3 Days / Week

M T W TH F

5 Days / Week

- Annual invoices will be prepared based on the options above that are selected.
- Based on availability, you may be able add a day of After Care to your selected option. There is an upcharge (prorated for the option selected) for that add-on which will be reflected on the following month's invoice.
- Specific days of the week selected may be flexible month to month based on availability.
- Payments are due regardless of child's attendance. However, each child enrolled in Before or After Care will be afforded the number of days reflected on their scheduled weekly attendance for the school year as an excused absence which will be credited to their account if used.
- Accounts past due can result in suspension of daycare use until account is current.
- All costs for plans and fees are reflected on the pricing information sheet.

Parent Signature: _____

Date: _____

GAARDE CHRISTIAN DAYCARE 2024 - 2025 REGISTRATION FORM

STUDENT INFORMATION

Child's Legal Name: _____ Date of Birth: _____ Age: _____

Name Child Uses (if different from above): _____ Male Female

PARENT/GUARDIAN INFORMATION (attach a copy of the custody order for specific court order)

CHILD LIVES WITH: Mother Father Stepmother Stepfather Other _____

MOTHER'S INFO

Name: _____

Address: _____

Phone: _____

Email: _____

Employer: _____

Employer Address: _____

Work Phone: _____

FATHER'S INFO

Name: _____

Address: _____

Phone: _____

Email: _____

Employer: _____

Employer Address: _____

Work Phone: _____

EMERGENCY CONTACT / AUTHORIZATION FOR CHILD PICK-UP

(Must be 18 years of age. List in order of preferred contact)

NAME

PHONE

RELATION TO CHILD

*** PLEASE NOTE:** Student will only be released to parent/guardian unless parent/guardian provides written notification in the event someone other than parent/guardian listed above will pick up a child from Day Care.

OUT OF TOWN EMERGENCY CONTACTS

(Include two out of town friends or relatives)

NAME

PHONE

RELATION TO CHILD

PHOTO RELEASE PERMISSION (Please select only one of the following options)

I give permission for photos and videos of my child to be used in school advertisements, including on the internet.

I do not give my permission for photos and videos of my child to be used in school advertisements, including on the internet.

MEDICAL RELEASE INFORMATION

Physician: _____ Phone: _____

Physician Address: _____

Dentist: _____ Phone: _____

Insurance Company: _____ Phone: _____

Agent Name: _____ Phone: _____

Policy #: _____ Group #: _____

Principal Parent/Guardian on Policy: _____

Allergies: Food: _____ Medicine: _____

Other: _____

Please list TX protocol for any allergy: _____

Dietary Restrictions: _____

Does your child have a reaction to bee stings? Yes No Unknown

Current Medications: _____

Serious Illnesses / Accidents to Date: _____

Date of last Tetanus Immunization: _____

MEDICAL TREATMENT, TRANSPORTATION, AND HOSPITAL AND/OR PHYSICIAN'S CARE

I acknowledge that participation in Gaarde Christian Day Care involves risk to the participant (and to the participant's parents or guardians if the participant is a minor) and may result in various types of injury including, but not limited to, the following: sickness, exposure to infectious/communicable disease, bodily injury, death, emotional injury, personal injury, property damage, and financial damage. In consideration for the opportunity to participate in GCDC, the participant (or parent/guardian if the participant is a minor) acknowledges and accepts the risks of injury associated with participation in GCDC. The participant (or parent/guardian) accepts personal financial responsibility for any injury or other loss sustained during participation in GCDC as well as for any medical treatment rendered to the participant that is authorized by the sponsor or its agents, employees, volunteers, or any other representatives (collectively referred to as the "activity sponsor") including Emergency vehicle transport to a medical facility. Further, the participant (or parent/guardian) releases and promises to indemnify, defend, and hold harmless the activity sponsor for any injury arising directly or indirectly out of participation in GCDC, whether such injury arises out of the negligence of the activity sponsor, the participant, or otherwise.

As a licensed daycare in the state of Oregon, we follow policy/protocols regarding sicknesses. Every family will be expected to follow the "health for all" system which means parents are responsible for evaluating their own child's health prior to each day's admittance to daycare. Before signing in, every child will be assessed daily by a staff person, expecting no child to be sent to daycare with a treated fever or cough. If a student has a positive test for any virus, there is an expectation of disclosure to the daycare director. All Daycare policies are subject to change per guidelines from the State of Oregon.

AGREEMENT & AUTHORIZATION

Parent/Guardian, by signing below, you acknowledge that you have read, understand, agree to, and completed the necessary information required for the Registration, Medical Release, and People Authorized to Pick-up Child and that the information is current. You also state that you have reviewed the current license certificate for GCDC.

Parent Signature: _____ Date: _____