

Brighter Beginnings Learning Center Billing and Collection Policy

The collection of tuition is done at the beginning of each week, usually on Monday <u>mornings</u>. Payment is expected in advance for child care so there will never be a balance on an account. We will accept <u>up to 30 days</u> of future payments.

Billing is based on your child's contracted schedule. Credits are not given for days missed, including sick days or in cases where your child must leave early due to illness or other personal reasons. Requests for changes to your child's contracted schedule must be made in writing (email) and if the change is accepted in writing (email), the appropriate tuition changes will be made to your account.

After three months at Brighter Beginnings Learning Center, full-time families will receive two weeks (10 days) of vacation and part-time families receive one week (5 days) of vacation per calendar year. Vacation time must be submitted at least two weeks in advance and must be used one week at a time. Unused vacation time does not roll over from year to year.

Upon registration, you must choose <u>ONE</u> of the following two billing methods to make payments:

- 1. Withdrawal/debit a checking or savings account (EFT/ACH)
- 2. Charge against a credit card or withdrawal from a debit card

Registration with one form of payment is required at the time your child is enrolled. EFT is the preferred method of payment, however if parents choose to pay with a <u>credit/debit</u> <u>card, a 3% convenience fee will be added</u> to the weekly tuition charge.

We prefer NOT to accept personal checks as a "regular" or "routine" form of payment.

And we ask that you DO NOT pay using cash (it's too difficult for you to validate historical payments).





Electronic Funds Transfer (EFT) Authorization

I hereby authorize Brighter Beginnings LLC to initiate weekly withdrawals from my checking/savings account listed below for the purposes of child care tuition payments for my child(ren). I have attached a <u>voided check</u> for the account specified below. This authorization is to remain in effect until Brighter Beginnings LLC has received written (email) authorization from me of its termination or change.

Additionally, I grant Brighter Beginnings LLC the right to initiate adjustments to correct any erroneous credit or debit errors or to apply additional charges/fees.

Bank Name:	
Bank Address:	
Bank Telephone: ()	
Parent Name Printed:	
Parent Signature:	Date:
Circle one: Checking or Savings	
Routing Number:	
Account Number:	
These numbers are located on the bottom of your check as fo	llows:
1: 1:: <th1::< th=""> 1:: <th1::< th=""> <th1::< th=""> <th1::< th=""></th1::<></th1::<></th1::<></th1::<>	

PLEASE ATTACH A VOIDED CHECK

