



# Child Care and Early Learning Center Enrollment Contract

JCC Cattaraugus County Campus  
Technology Center  
260 N Union St. Olean, NY 14760

Child's Full Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Is enrolled with the JCC YMCA ELC Program starting on \_\_\_/\_\_\_/\_\_\_.

Parent's Name: \_\_\_\_\_

Parent is a \_\_\_ JCC Student \_\_\_ JCC Faculty Member \_\_\_ JCC Staff Member \_\_\_ Community Member

Home Address: \_\_\_\_\_

Telephone: HOME \_\_\_\_\_ CELL \_\_\_\_\_ WORK \_\_\_\_\_

Parent's Employer(s): \_\_\_\_\_

Email Address: \_\_\_\_\_

The plan that I have chosen to enroll my child in is (please check):

\_\_\_\_\_ **Full Time (4 or more days per week)**

\_\_\_\_\_ **Part Time (3 days or less per week)**

\_\_\_ **Monday** \_\_\_ **Tuesday** \_\_\_ **Wednesday** \_\_\_ **Thursday** \_\_\_ **Friday**

### I have read and understand the Program Policies (parent handbook) which:

- \_\_\_\_\_ Set forth the responsibilities of the program
- \_\_\_\_\_ Set forth the responsibilities of the parents/caretakers
- \_\_\_\_\_ Describes the admission policy
- \_\_\_\_\_ Describes the policy regarding late pick up
- \_\_\_\_\_ Describes the food service arrangements
- \_\_\_\_\_ Describes manner of payment/fees
- \_\_\_\_\_ Describes fees to be charged
- \_\_\_\_\_ Describes program to be provided
- \_\_\_\_\_ Describes behavior management policy
- \_\_\_\_\_ Describes medication policy

\_\_\_\_\_  
Signature of Parent

\_\_\_\_\_  
Date

\_\_\_\_\_  
Director

\_\_\_\_\_  
Date

**Any questions or concerns regarding any Early Learning Center Program can be directed to:**

**Brianna Simms**  
Executive Director of Child Care  
Briannas@twintiersymca.org  
585-808-2124