# SUMMER PROGRAM 2019

JUNE 17<sup>TH</sup> - AUGUST 14TH MONDAY-FRIDAY 7:00 A.M. - 6:00 P.M. (EXTENDED HOURS)



#### **QUALITY TIME LEARNING CENTER**

(With trips throughout Washington, D.C. and Greater Metro Area) **8101 Georgia Avenue, Silver Spring, MD 20910** 

FEATURING · Arts & Crafts · Games · Develop Life Skills & Social Skills · Leadership Development · Sports Activities · Creative Writing

#### WWW.QUALITYTIMELLC.COM

For more information, contact 301-588-3350 or info@qualitytimellc.com

For children who have not registered for Quality Time to begin school on Wednesday, August 21, 2019.

Quality Time will provide child care services for 5-12 years at \$175.00 per week from August 19, 2019 to August 30, 2019.

Limited Space is Available. Sign-up now.

Please request this service by completing the additional 2 weeks form in the Office.

**AGES 4-12** 

LIMITED SPACE

**TUITION** 

\$225 Per Week (All Day Program) Activity Fee: \$295

## FIELD TRIPS

Six Flags
Swimming
Washington Nationals
&
Washington Mystics
DC Museums
Dave & Buster's
Majestic Theater (Weekly)
The Pentagon
Sky Zone
Bowling

AND MORE!!

#### ENRICHMENT AREAS

Athletics
Music . Arts
Social . Life Skills
FUN !!!







#### **Quality Time Learning Center** 8101 Georgia Avenue, Silver Spring, MD 20910

# **2019 Summer Program Welcome Letter**For Children Completing our 4 Year Old Program and Older

Dear Parents:

Hello and welcome to Quality Time Learning Center Summer Program for 2019.

We hope this letter finds you and your family well. As we begin the 2019 season, we would like to welcome all of our new summer families and would also extend a great welcome to each of our returning families. Returning families, please take advantage of our time sensitive weekly discount. More information below.

Please ensure you print and complete registration forms in the main office or from our website and return them before the program begins on **Monday**, **June 17**, **2019**.

#### All forms are under Forms & Downloads (Summer Program)

- \*Summer Program Registration Form and Tuition Contract
- \*Emergency Form
- \*Permission Slip Approval/Picture Authorization
- \*Emergency Contact/Pick-Up Person(s) and Child Release Authorization Form
- \*Notarized Forms: Medical Emergency and Custody Cases/Legal Matters
- \*Health Inventory and Immunization Record
- \* Code of Conduct and All About My Child
- \*Bi-Weekly Payment Schedule

When you return your forms please include a school photo of your child for emergency purposes. Your child may not attend the program unless you have completed your enrollment and medical forms. Last year's forms are not acceptable forms for your child to attend our 2019 Summer Program.

As always we are looking forward to a safe and rewarding program season.

Sincerely,

Brian Crump Summer Program Director

Email: <u>briancrump13@gmail.com</u> <u>info@qualitytimellc.com</u>



# QUALITY TIME LEARNING CENTER 8101 GEORGIA AVENUE

**JUNE 2019** 

LDER	SATURDAY	Summer Summer	8	15	22	
4 YEARS & OLDER	FRIDAY		7	Last day of School	21 SUMMER KICK OFF COOKOUT	28 Climb Zone
916	THURSDAY		9	13	20 Silver Spring Library	WHEATON POOL
S AUGUST 14, 20	WEDNESDAY		2	12	19 MAJESTIC MOVIES	26 MAJESTIC MOVIES
SUMMER PROGRAM BEGINS JUNE 17 AND ENDS AUGUST 14, 2019	TUESDAY		4	11	ELLSWORTH CITY PARK/PLAYGROUND	25 Air & Space/ History, Science National Museum
	MONDAY		3	10 Gburg Park	17 WELCOME CAMP DAY	Don't A
SUMMER PROG	SUNDAY	THE SUMMER!	2	6	16 FATHER'S DAY	23 24 SUMMER SPRIT WHEATON POOL WEEK
1B						

JULY 2019

4 YEARS & OLDER SATURDAY 20 27 A SKYZONE PICKYOHR FRUIT SKY ZONE FRIDAY 26 19 25 Duckpin Bowling NO CAMP QTLC IS WHEATON POOL WHEATON POOL CLOSED THURSDAY SUMMER PROGRAM BEGINS JUNE 17 AND ENDS AUGUST 14, 2019 31 Washington Nats MAJESTIC MOVIES 17 KIDS IN CANAL MAJESTIC MOVIES GEORGETOWN WATERFRONT WEDNESDAY MYSTICS 10 MAJESTIC MOVIES MAJESTIC MOVIES MAJESTIC MOVIES **CLEMYJONRTI PARK TUESDAY** 2 BOUNCE U 16 WHEATON POOL WHEATON POOL WHEATON POOL WHEATON POOL 8 WHEATON REGIONAL PARK MONDAY 15 SUNDAY 28

# **AUGUST 2019**

4 YEARS & OLDER SATURDAY 24 WHEATON POOL ICECREAM SOCAIL The Yce Cream Social Oliver +5 Ice Gream Dress SewAlong, July 2010 REFRE SHER FRIDAY CARE 30 23 16 MAJESTIC MOVIES | WHEATON POOL THURSDAY 22 29  $\infty$ Last Day Of 12:00 Early WEDNESDAY Release Summer ACADEM IC 28 21 SUMMER PROGRAM ENDS AUGUST 14, 2019 FE TUESDAY SIX FLAGS 6 Gburg Park 13 27 12 Summer Party WHEATON POOL and Awards MONDAY 26 19 KID'S CULINARY **ART WEEK** SUNDAY 18

# 2019 Summer Program

#### **Permission Slip Approval**

	has permission to attend <b>ALL field trips</b> that will be held
the above-mentioned child to the nearest hosp	emergency, I hereby authorize Quality Time Learning Center to transportial for care. I agree to accept responsibility for all financial expenses but the summer. The school owners, directors, teachers, and assistants bijury.
My child has permission to attend all the field trip	s using bus/motor vehicle. Yes No
My child has permission to attend all walking trips	s to the destinations close to school. YesNo
My child has permission to go into the pool (Mon	tgomery County Pool). Yes No
In the event my child does not attend the trips, m 2:00 p.m.). Children cannot join trips in progress	y child will stay at home and will come to school after the trips (i.e., afters.
From time to time my child has permission to go t	to local impromptu fields trips that may not be on the schedule.
Daily, parents will pack lunch in disposable bags	to be taken on trips. No refrigeration is provided.
to be given, name of medication and time to b	re one dose with label including child's name, dosage amount, date e given for <u>FIELD TRIPS ONLY</u> .
Maria 1 /0 /1 1 01 1	
Mother's/Guardian's Signature	Date
Mother's/Guardian's Signature Father's/Guardian's Signature	Date
Father's/Guardian's Signature	
Father's/Guardian's Signature  Pic  To aid us with our marketing and promotional ma	Date  cture Authorization  aterials, we are asking parents to cooperate in allowing us to photograph vertising on school related web sites and other promotional material
Father's/Guardian's Signature  Pic  To aid us with our marketing and promotional mand use pictures for display in brochures, adv. Additionally, we may display our pictures on bulle Below, you will find a consent form allowing us to	Date  cture Authorization  aterials, we are asking parents to cooperate in allowing us to photograph vertising on school related web sites and other promotional material tin boards.  to take pictures to be used for the purposes stated above. Please fill our acher. I,
Father's/Guardian's Signature  Pic  To aid us with our marketing and promotional mand use pictures for display in brochures, adv. Additionally, we may display our pictures on bulle Below, you will find a consent form allowing us to the consent form and return it to your child's tea Quality Time Learning Center permission to take	Date  cture Authorization  aterials, we are asking parents to cooperate in allowing us to photograph vertising on school related web sites and other promotional material tin boards.  to take pictures to be used for the purposes stated above. Please fill our acher. I,





### **TUITION IS ONLY \$225 PER WEEK**

WITH 8 OR 9 WEEKS ENROLLMENT - CALL FOR DETAILS: Ms Dorine @

Sizes: Small (6-8)	Medium (10-12)	Large (14-16)
My child's T-Shirt size is		
PLEASE INDICATE YOUR CHIL	LD'S T-SHIRT SIZE.	
This year all children 4 years old an EVERYDAY!!	nd above will be required to v	wear a Summer T-Shirt
	Quality Time 1 carning Center	
At this time it is my bestweeks.	guess that my child wil	ll attend the program for
My complete registration/ac	ctivity fee enclosed \$	
CHECK ONE:		
301-588-3350.		indo. Mo. Donne C



#### Quality Time Learning Center 8101 Georgia Avenue, Silver Spring, MD 20910

# 2019 Summer Program Registration Form (Graduated Four Year Olds & Above)

				Enrollment Date:	//_
Child's Name:				D.O.B/	
	First	M.I.	Last	Amo	
				Age	
Address:					
		Gender: Male	Female		
Mother/Guardian'	s Name: (circle)				
		First	M.I.	Last	
Social Security No	umber:				
Address:		-		Home Phone: ( )	-
Work Address: _				Work Hours:	to
Work Phone: (	)	Cell	Phone: ( )	<u>-</u>	
	E-mail A	ddress:			
Father/Guardian's	Name: (circle)				
		First	M.I.	Last	
Social Security No	ımber:		····		
Address:			<u></u>	_ Home Phone: ( )	
Work Address: _				Work Hours:	to
Work Phone: (	)	Cell	Phone: ( )	_ <del>-</del>	
**List any existing	E-mail A medical cond	ddress: itions, allergies and/o	r special attention y	our child may require:	
(For those emergen Hospital or Washin		-	derstand and agree t	hat my child will be taken to H	oly Cross



#### EMERGENCY CONTACT, PICK-UP PERSON(S) AND CHILD RELEASE AUTHORIZATION FORM

This document is the sole authority for pick-up/release of your child and is in force from **June 17**<sup>th</sup> – **August 14**<sup>th</sup> **2019 only.** \*The following people are authorized to visit my child at school and to pick-up my child from Quality Time Learning Center:

Child's Name: (First)			_Nick Nam	ne:	
Address:			h Date:		
Parents who fail to confirm wit	h the school their late pick-up	before 6:00 p.m. will p	pay double th	e normal la	te pick up fee.
Mother's			Fat	her's	
		Name:			
Address:		Address:			
Phone: (H) ()	-	Phone: (H) (			
Employer:		Employer:			
Phone: (W) ()	-	Phone: (W) (_			
Cell Phone: ()		Cell Phone: (			
Phone: (H) Phone: (W)					
Phone: (H)	Phone: (H)	F	Phone: (H)		
		P	Phone: (W) _		
Cell Phone:					
Relationship:	<del>-</del>		_	:	
In case all above named author provide us the name/s and phone Parents are responsible for ensu their responsibilities, e.g., having (LEGAL AUTHORITIES WILI THE CENTER, i.e., AT 7:00 P.M Note: For any change in Eniformation as soon as changes o	e number/s of other alternate paring that the persons who are picture I.D. at the time of picture I.D. at the picture	our child, parents mu pick-up person/s. e authorized to pick-u ck-up, and must be 16 HILDREN LEFT AT ( person(s), Parent/Gua dated phone number(s	ist call the scl ip a child from years old or o QTLC ONE I ordians are r ) at all times.	m the Cento lder. HOUR AFT	er are aware of
The Center is <b>NOT</b> authorize 1.		2			
3		4			
Parent's Signature: *Unless amended in 1	person by the signing n	DateDate	te:/_ me 17 <sup>th</sup> - A	/_ ugust 14	 th. 2019.



#### Quality Time Learning Center 8101 Georgia Avenue, Silver Spring, MD 20910

#### 2019 Summer Tuition Contract (Children Completing a 4 Year Old Program or Older)

Tuition for my child	is \$	bi-weekly. This rate remains in effect from
June 17, 2019 until August 14, 2019.		

#### 1. Payment Information

• Checks and certified funds are acceptable forms of payment. All credit card/merchant payments will incur a \$5.00 convenience fee per transaction either on-line, by telephone, and/or in person. Tuition must be paid according to the attached Tuition Payment Schedule. Tuition not paid according to the Summer Tuition Payment Schedule (TPS) shall incur a late fee of \$30.00 on Wednesday mornings after a due date has expired (Parent's initials) Tuition which is more than two weeks past due may cause your child to be dropped from the program and his/her slot to be allocated to another child. Checks returned by bank for any reason shall incur a \$50.00 returned check charge. (Parent's initials) Future payments may be requested in cash or certified funds.

#### SUMMER TUITION PAYMENT SCHEDULE

#	Payment Due Dates	Amount to Pay	Weeks Paid
1	June 4, 2019	\$225.00	06/17/19 to 06/21/19
2	June 18, 2019	\$450.00	06/24/19 to 07/05/19
3	July 2, 2019	\$450.00	07/08/19 to 07/19/19
4	July 16, 2019	\$450.00	07/22/19 to 08/02/19
5	July 30, 2019	\$360.00	08/05/19 to 08/14/19

- When possible, all payments should be made directly to the Accounting Office. If any discrepancy exists between
  your records and our records, please notify the Accounting Office immediately in writing.
- No reduction in tuition is made for illnesses, holidays; weather related emergency closing or for any reason the school may need to close early\_\_\_\_\_\_\_\_ (Parent's initials)
- The parent is obligated to begin paying tuition on the Contracted Start Date (CSD) and will therefore be invoiced as of the CSD. Should a space not be available on the CSD the Center will refund all monies except the registration fee, unless the Center makes it known otherwise at the time of contract signing \_\_\_\_\_\_\_ (Parent's initials)
- Any monies not paid according to the terms of this contract will be subject to legal action\_\_\_\_\_\_. (Parent's initials). If this course of action is taken, you will be liable for all court costs. Collections companies are under contract with Quality Time Learning Center to collect any outstanding debts.

#### 2. Center's hours/late pick up

- The Center's hours of operation are 7:00 a.m. 6:00p.m. Parents are requested to be prompt in picking up their child. Your account will be charged a late fee of \$3.00 per minute after 6:00 p.m. until 6:30p.m. Habitual late pick-ups may cause suspension. Late pick-up fees after 6:30 p.m. will be \$5.00 per minute. Late pick-up fees must be paid-in-full by close of business the next business day or the late pick-up fee will double (Parent's initials) In case of inclement weather, if the Center closes early, late pick-up fees will be applied after the early closing time of the inclement weather delay.
- Parents who fail to confirm with the school their late pick-up before 6:00 p.m. will pay double the normal late pick up fee
- For parents who pick-up their child late more than three times in any 30 day period, a fee schedule of \$10.00/minute late fee may be charged (Parent's initials) Suspension and/or expulsion may also be remedies.

#### 3. Completion of Forms

- All forms must be completed and returned before the child enters the program. All forms should be updated whenever there are any changes in parents/guardian information (e.g. phone numbers, change of address, etc.) (Parent's initials)
   This contract becomes effective as of June 17, 2019 and remains in effect through August 14, 2019.
- All medical information must be current according to your child's age e.g., Physical Examination, Lead Screening, Immunizations. Although your child's administrative forms are not tuition related, your child will not be able to start our program without all forms. It is the parent's responsibility to update all records as necessary.\_\_\_\_\_\_\_\_. (Parent's initials) The Center has the right to suspend the child/ren for out dated phone numbers, contact information and incomplete records.



#### 4. Lost Items

• Quality Time Learning Center will not be responsible for any item(s) lost clothing, e.g., coats, swim suits, towels, swims shoes, jackets, sweaters, toys, blankets, sheets, car seats, strollers etc., and will not reimburse parents for lost or damaged items.

#### 5. Student Photo ID:

Parents must provide a photo (wallet size) of their child for identification and security purposes.

#### 6. Withdrawing/Returning/Other

- Quality Time Learning Center continues to have a very high demand for its services. We always want to be in the position to
  offer our services to parents who weekly meet their financial obligations to the school. Parent's failure to remain current in
  their tuition may be given one weeks' notice prior to dismissal. Full tuition payment is expected during this notice period.
- Parents are required to pay for five (5) days a week as long as their child is enrolled. Payment is required in advance when your child is out sick; you are on vacation or when school is closed. In the event of an early school closing due to inclement weather, no reduction in tuition is made (Parent's initials)

#### 7. School Regulations

Parents are expected to respect and uphold school policies and regulations and the contractual agreement they have with the school. QTLC reserves the right to ask parents to remove their child from the school if said parents disregard or fail to uphold school policies, regulations, or terms of the contractual agreement they have with QTLC. All deposits, tuition, and any other fees paid in advance are non-refundable for a parent who is expelled from the summer program......................... (Parent's initials)

#### 8. Understanding Contract

• I/We undersigned, have read and fully understand, and agree to comply with the summer tuition contract/fee, scheduled policies of Quality Time Learning Center\_\_\_\_\_\_ (Parent's initials)

#### 9. Activity Fee

Activity Fees will be billed according to the following schedule. Should a parent be enrolled for fewer weeks a refund may be appropriate. (Parent's initials)

## INITIAL WEEKS THAT THE STUDENT WILL ATTEND

ACTIVITY	FEE FOR	R WEEKS
AT	TENDIN	G

Weeks	Initial
6/17/2019	
6/24/2019	
7/1/2019	
7/8/2019	
7/15/2019	
7/22/2019	
7/29/2019	
8/5/2019	
8/12/2019	
TOTAL WEEKS	

ŀ	# of Weeks	Fee	Refund
	9 Weeks	295.00	0.00
	8 Weeks	295.00	0.00
	7 Weeks	265.00	30.00
	6 Weeks	235.00	60.00
	5 Weeks	205.00	90.00
	4 Weeks	175.00	120.00
	3 Weeks	145.00	150.00
	2 Weeks	115.00	180.00
	1 Week	85.00	210.00

#### THIS CONTRACT SUPERSEDES ALL PREVIOUS CONTRACTS.

ignature of Financially Responsible Person:					_//_
Print Name of Financially Responsible	le Person:				
Contract Start Date:/	QTLC will start billing on		(Parent's initials	)	
Fees Paid	Check#	M.O.#	Cash	Credit Card	On-Line
Registration Tuition	-				-
Summer Activity Fee (SAF)					