

2026 Infant | Toddler | Preschool Tuition Agreement

Please CHOOSE the Campus:

<p><input type="checkbox"/> Olive @ St James (8wks – 5 yrs) 34700 Fremont Blvd (510) 770-4999 preschool.sj@olivechildren.com</p>	<p><input type="checkbox"/> Little STEaMers (8wks-5 yrs old) 43531 Mission Blvd. (510) 770-4848 info@littlesteamers.org</p>	<p><input type="checkbox"/> Olive @ Warm Springs (1.5 – 5 yrs) 47385 Warm Springs Blvd (510) 770-4003 preschool.ws@olivechildren.com</p>
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Start Date: ____/____/____ to ____/____/____

Today's Date: _____

Student Name: _____ **New/Return Student:** _____

Date of Birth _____ **Current Age:** _____ ; **Potty Trained:** ____ Yes; ____ No

Email: _____ **Home phone:** _____

Address: _____

Mom Name: _____ **Father Name:** _____

Mom Phone: _____ **Father Phone:** _____

Mom Email: _____ **Father Email:** _____

Mom Occupation: _____ **Father Occupation:** _____

Mom Employer: _____ **Father Employer:** _____

Preferred E-mail for Billing: ____ Mom; ____ Father

Please **MARK** the program you would like to enroll your child. (Age requirement as of September 1st)

Program (check one)	# Days	Time	Monthly
<input type="checkbox"/> Infant Care (8 wks – 17 mos)	<input type="checkbox"/> 5 Full Days	8:00 – 6:00 pm	<input type="checkbox"/> \$2,860
	<input type="checkbox"/> 3 Full Days	8:00 – 6:00 pm	<input type="checkbox"/> \$2,460
	<input type="checkbox"/> 5 Half Days	8:30-12:30 pm	<input type="checkbox"/> \$2,260
<input type="checkbox"/> Toddlers (18 mos - 2 to 3 years old) <i>*Please see Toddler Option Agreement</i>	<input type="checkbox"/> 5 Full Days	8:00 – 6:00 pm	<input type="checkbox"/> \$2,230
	<input type="checkbox"/> 3 Full Days	8:00 – 6:00 pm	<input type="checkbox"/> \$2,030
	<input type="checkbox"/> 5 Half Days	8:30-12:30 pm	<input type="checkbox"/> \$1,830
<input type="checkbox"/> Preschool (3 – 4 years old)	<input type="checkbox"/> 5 Full Days	8:00 – 6:00 pm	<input type="checkbox"/> \$2,130
	<input type="checkbox"/> 3 Full Days	8:00 – 6:00 pm	<input type="checkbox"/> \$1,930
	<input type="checkbox"/> 5 Half Days	8:30 -12:30 pm	<input type="checkbox"/> \$1,730
<input type="checkbox"/> Pre-K Transitional Kinder (4 - 5 years old)	<input type="checkbox"/> 5 Full Days	8:00 – 6:00 pm	<input type="checkbox"/> \$2,130
	<input type="checkbox"/> 3 Full Days	8:00 – 6:00 pm	<input type="checkbox"/> \$1,930
	<input type="checkbox"/> 5 Half Days	8:30 -12:30 pm	<input type="checkbox"/> \$1,730
<input type="checkbox"/> Extended Care (Monthly)	5 AM PM	8-9 am 6-7pm	\$200 \$300
	3 AM PM	8-9 am 6-7pm	\$150 \$250

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Licensing Rights:

- (a) The Department has the inspection authority specified in Health and Safety Code Sections 1596.852, 1596.853 and 1596.8535.
- (b) The Department has the authority to interview children or staff without prior consent.
 - (1) The licensee shall ensure that provisions are made for private interviews with any children or staff members.
- (c) The Department has the authority to inspect, audit, and copy child or childcare center records upon demand during normal business hours. Records may be removed if necessary for copying. Removal of records shall be subject to the requirements in Sections 101217(c) and 101221(d).
 - (1) The licensee shall ensure that provisions are made for the examination of all records relating to the operation of the childcare center.
- (d) The Department has the authority to observe the physical condition of the child(ren), including conditions that could indicate abuse, neglect or inappropriate placement.

Summary of Charges:

- Date Received Application: _____ Date Processed Application: _____
- Registration Fee: New: \$100 Return: \$50 [non-refundable]
- Payment Plan: \$_____ Monthly Payment. Payment is due on the first of each month. The invoice is sent 5 days before the 1st of the month.
- Material Fee: \$350 Yearly Payment [Prorated; Unused months refundable]
- Extended Care Weekly fee: \$ 200 for either morning or Evening; \$300 for both the time
- Security Deposit: \$300 [refundable with 30 days written notice]
- Total Amount: \$_____ [Total amount will be invoiced on the first month; thereafter only monthly tuition]

Toddler Program Transition Option Agreement:

Our toddler program serves children ages 18-36 months. At 24 months, children may have the option to transition to our preschool program if they are developmentally ready. Our teaching staff determines readiness based on observations of your child's social, emotional, and cognitive development.

I acknowledge that my child's transition to preschool will be based on age and developmental readiness, with a 4-week transition period before fully moving to the preschool program. I understand that if my child is not ready at 24 months, they may remain until they are developmentally ready in the toddler program or until 36 months.

Parent/Guardian Signature: _____ Date: _____

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Olive Children Admission Agreement

This Admission Agreement is made between Olive Children and the undersigned applicant _____,
(Parent/Guardian), and is effective as of _____(date).

Payee Information

- The tuition and any related fees will be paid by:
Name of Payee: _____
Relationship to Child: _____
Address: _____
Phone Number: _____

Toddler Option Statement (Title 22, Section 101216.4)

- As per Title 22, Section 101216.4, the undersigned Parent/Guardian acknowledges receiving, reviewing, and understanding the options available for toddlers in the program.
- *"I acknowledge that I have reviewed and understood the toddler program options as outlined by Olive Children.*
 - Signature: _____
 - Date: _____

Tuition and Payment Terms

- Tuition Frequency: Tuition is due every month.
- Payments must be made by the first of the month.
- Payment Methods:
 - Tuition can be paid by ACH bank transfer, or via online payment through QuickBooks.
 - Payments in check can be made at the administration office.
- Late Payments: Payments received after the due date will incur a late fee of \$20.00.

Refund Policy

- Full tuition refunds are available if cancellation is made at least [number of days] before the program start date.
- Security Deposit will be credited towards the tuition of the final month.

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- No refund will be provided after the program has commenced.
- Refund requests must be submitted in writing to the administration at [email/contact information].

Notification of Rate Changes

- Any changes to the tuition rates will be communicated to the payee in writing at least 30 days in advance. Rate adjustments may occur annually or as necessary due to operational costs.

Vacation Policy

- 50% of tuition must be paid to keep the child's enrollment open
- Accounts can be frozen for up to 6 mos. and the child will be placed on the waitlist.

Termination Policy

- The Parent/Guardian or the program may terminate this agreement by providing 30 days written notice to the other party.
- If the child is to leave the program early, the Parent/Guardian must submit a written notice of termination at least 30 days before the planned departure date.
- The Parent/Guardian will be responsible for paying tuition for the final month of attendance, regardless of the child's departure date.

Signatures

I, the undersigned, agree to the terms outlined in this Admission Agreement.

Parent/Guardian Name: _____

Parent/Guardian Signature: _____ Date: _____

Program Representative Name: _____

Program Representative Signature: _____ Date: _____