



# THE GREATER PIKESVILLE RECREATION COUNCIL, INC.

## DISCOVERY CENTER

## WOODHOLME

### 2020-2021 Pre-K Contract Information



BALTIMORE COUNTY  
MARYLAND  
Department of  
Recreation and Parks  
60th Anniversary  
1949 - 2009

**Baltimore County Department of Recreation and Parks**



Baltimore County Department of Recreation and Parks  
**THE GREATER PIKESVILLE RECREATION COUNCIL, INC.**



**PRE-K CONTRACT FOR  
THE DISCOVERY CENTER AT WODHOLME  
Enrollment Year 2020-2021**



Pre-K Program for 3 and 4 year olds as of 09/01/20 – 5 day a week sessions – Monday thru Friday, 9AM – 4PM \_\_\_\_\_  
Before Care (7:00-9:00 AM) \_\_\_\_\_ After Care (4:00-6:00 PM) \_\_\_\_\_ Before & After Care (7-9AM - 4-6PM) \_\_\_\_\_

*This program will operate in correlation with the Baltimore County Department of Education school calendar and the school system's inclement weather policy and procedure.*

Child's Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Sex: \_\_\_\_\_ M \_\_\_\_\_ F Child's Date of Birth: \_\_\_\_\_

Mother/Guardian Name: \_\_\_\_\_ (H) Phone: \_\_\_\_\_

(W) Phone: \_\_\_\_\_ (C) Phone: \_\_\_\_\_

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

Address (if different from child): \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Father/Guardian Name: \_\_\_\_\_ (H) Phone: \_\_\_\_\_

(W) Phone: \_\_\_\_\_ (C) Phone: \_\_\_\_\_

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

Address (if different from child): \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Child lives with: \_\_\_\_\_ Both parents \_\_\_\_\_ Mother \_\_\_\_\_ Father

**Person to contact, in case of an emergency, when parent/guardian can't be reached:**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

(H) Phone: \_\_\_\_\_ (W) Phone: \_\_\_\_\_ (C) Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

**Persons authorized to pick up my child:**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Any allergies or medical conditions:

\_\_\_\_\_

\_\_\_\_\_

**MEDICAL CONSENT**

I give my consent for emergency medical care or treatment for my child, to be used only if I cannot be reached.

Signature: \_\_\_\_\_

**PERMISSION FORM**

I give my child, \_\_\_\_\_ permission to participate in all outdoor outings and field trips while enrolled in school.

Signature: \_\_\_\_\_

The school year cost for the 2020-2021 GPRC Pre-K Program (9 AM – 4 PM) is \$4,725.00 payable in 9 monthly installments only. The last month non-refundable application fee required at registration will be applied to the final payment month (May).

*Please initial those school year plans you require for your child:*

\_\_\_\_\_ Plan A – Pre-K – School day session of 9:00 AM – 4:00 PM (\$4,725.00).  
\$525 per month, due on the 1<sup>st</sup> of each month, September 2020 through May 2021 (9 months)

\_\_\_\_\_ Plan B – Pre-K & Before Care – School day session of 7:00 AM – 4:00 PM (\$6,300.00)  
\$700 per month, due on the 1<sup>st</sup> of each month, September 2020 through May 2021 (9 months)

\_\_\_\_\_ Plan C – Pre-K & After Care – School day session of 9:00 AM – 6:00 PM (\$6,750.00)  
\$750.00 per month, due on the 1<sup>st</sup> of each month, September 2020 through May 2021 (9 months)

\_\_\_\_\_ Plan D – Pre-K & Before & After Care – School day session of 7:00 AM – 6:00 PM (\$7,839.00)  
\$871.00 per month, due on the 1<sup>st</sup> of each month, September 2020 through May 2021 (9 months)

**CONTRACT**

I, we are the legal guardians of \_\_\_\_\_.

We hereby jointly and severally guarantee the prompt payment of all fees as aforementioned agreed, to the Greater Pikesville Recreation Council, Inc. as evidenced by our signatures hereunder.

I, we agree and guarantee the total payment due as per the plan we have chosen.

The obligation being guaranteed is (circle one): \$4,725 \$6,300 \$6,750 \$7,839 for the 2020-2021 school year.

The monthly payment is due on the first of the month (circle one): \$525 \$700 \$750 \$871.

If payment is more than five days late a thirty dollar (\$30.00) late fee will be charged.

I, we also agree that any balance which remains unpaid as per the plan chosen is subject to an eighteen percent (18%) rate of interest per annum charge (1.5% per month) until the balance is paid in full.

This guaranty is a limited guarantee, and does not cover any debt or obligation than stated above.

If any legal action is brought forth by the Greater Pikesville Recreation Council, Inc. in the collection of this debt, I, we will be responsible for any and all legal costs and fees, in addition to our account's unpaid balance, once this matter has been turned over to an attorney or collection agency.

\_\_\_\_\_  
Signature Date

\_\_\_\_\_  
Signature Date

The contract for services must be signed by both parents to be valid.

**All forms and agreements must be returned to the Greater Pikesville Recreation Council, Inc.**  
**c/o The Discovery Center at Woodholme**  
**Woodholme Elementary School**  
**Attn: Stephanie Steininger, 410-602-1903**  
**300 Mount Wilson Lane**  
**Baltimore, MD 21208**

