

## **10.12 Whimble Pre-School Fees Policy**

Individual hourly rate is currently £4.60 per hour for 3 – 5 year olds and £4.90 for 2 ½ to 3 year olds. All hours must be paid for. All fees charged relate to hours or weeks not funded by EYEF:

- **Early Years Education Funding (EYEF)**

Whimble Pre-school are in receipt of EYEF for 3 and 4 year olds and eligible 2 ½ year olds. The 3 and 4 year old funding is available the term following your child's third birthday. To access this funding you need to complete a EYEF CIF form and provide a copy of your child's birth certificate or passport

### **Sickness and Absence**

- If a child is absent due to sickness or other reasons the fee will remain in place as the preschool will have kept their place open and still have to employ and pay staff.
- In the case of continuing illness please speak to the staff as fees for such absences are at the discretion of the preschool.
- In the event of any other occasional absence (sickness, doctor or school visits) notification is appreciated and the normal fee will still apply. If absence should continue please contact us again with details. A child absent without notification for more than two weeks could have their place filled by another child on the waiting list.

### **Payment of fees**

- Bills will be given to the parent during the first few weeks of term where payment dates and amounts will be stated. Fees should be paid within 21 days of the invoice date given on the bill.
- **ALL FEES MUST BE PAID ON TIME** or a place may not be offered for the following term. The brothers/sisters of any child who has left Pre-School will not be accepted until any outstanding fees are cleared. There is no refunding of money for missed days barring exceptional circumstances.
- **Non-funded fees may be paid by cash, cheque, bank transfer or via the government tax scheme.**
  - Cheques should be made payable to Whimble Pre-school and will be paid into the bank weekly. Cash or cheques can be given to Jo (Manager) or Abby (Deputy) at preschool where it will be placed in a locked cash box. Cash or cheques should be placed in an envelope clearly marked with the child's name and the amount being paid. A receipt for payment of fees by cash or cheque will be given to you at the time of payment. Please keep your receipt as proof of payment.
  - Bank transfers should be made to Whimble Preschool Sort Code: 09-07-23 Account Number 39095482. (Santander Corporate Banking)

### Late payment of fees

- Should a problem arise concerning payment of fees parents should speak to us before this becomes an issue, we may be in a position to help. If you have any difficulty paying, please do not hesitate to speak to either the Administrator Andrea Bristow or Pre School Manager, Joanna Sibley (in the strictest confidence).
- Fees should be paid within 21 days of the invoice date given on the bill. If payment is not made within this timescale a reminder will be sent to the parent/carer and payment should be received within 7 days or the parents need to speak to our Administrator Andrea Bristow or the Pre School Manager, Joanna Sibley. If fees continue to be outstanding the parent will be sent a further letter asking for fees to be paid within 21 days upon receipt of the letter or further steps may be taken. Parents will also be asked to withdraw their child until the outstanding fee is paid. Any child who is receiving Early Years Education Funding will be able to remain at pre-school for their funded hours.

### Termination of the contract

- Whimble Pre-school reserves the right to terminate the contract without notice in the event of unsuitable behaviour from parents or non payment of fees following the non payment procedure. At all other times one months notice in writing will be given.
- FOUR WEEKS PAID NOTICE IS REQUIRED IF YOU WISH TO WITHDRAW YOUR CHILD FROM PRE-SCHOOL, as it takes us a number of weeks to offer your place to another child and get them started in Pre-School.

This policy was adopted at a meeting of	<u>Whimble Pre-School</u>
Held on	<u>17/10/19</u> (date)
Date to be reviewed	<u>12/3/21</u> (date)
Signed on behalf of the provider	_____
Name of signatory	<u>Joe Pearce</u>
Role of signatory (e.g. chair, director or owner)	<u>Chairperson</u>
	_____