**CHILD CARE CONTRACT**

|  |  |
| --- | --- |
| **Child’s Name** |  |
| **Child’s Birthday** |  |
| **Child’s Age** |  |

## **Parent/Guardian’s Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## **Parent/Guardian’s Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**A Child Care Contract is a contract made between the parent or and a childcare provider that outlines the terms of childcare for the parent or guardian's child or children. Both parties must agree to all terms written in this contract.**

**Terms:**

1. The term of this contract will begin on the date this contract is signed by the parties and will remain in full effect indefinitely until terminated.
2. If either party wishes to terminate this contract, that party may do so by serving a written notice to the other party.
3. If either party breaches a term under this contract, the non-defaulting party may terminate this contract immediately.
4. Both parties agree to do everything necessary to ensure the terms of this contract are followed.

**Outline of Contract:**

1. Admission Agreement
2. Schedule Agreement
3. Payment Policies Agreement
4. Tuition Policy
5. Withdrawal and Discharge Agreement

**ADMISSION CONTRACT**

**Terms:**

1. I understand that my child must meet the enrollment requirements of the school. This includes abiding by the school’s age group restrictions.
2. I understand that all registration documents must be completed and contain honest and truthful information.
3. I understand and have paid the enrollment fees including the registration fee $60
4. I understand and comply with the guidelines for enrolling siblings into the program.
5. I understand and respect the waitlist process.
6. I understand and comply with the school’s visitation policy.
7. I understand and will pay the annual enrollment fee to ensure my child’s spot for the upcoming school year.
8. I understand that it is my responsibility to bring in the items required for my child in the school. This includes extra change of clothes and proper outdoor wear.
9. I understand that it is my responsibility to update my child’s forms for the school’s records. I will update ethe school on any changes to these forms that I need to make.
10. I understand that I need to complete a 30-day written notice to the center if I choose to withdrawal my child from the school.
11. I understand that the school has a right to terminate a child’s enrollment under specific circumstances outlined in the parent handbook.
12. I understand that I must supply a pickup authorization written document for any child who is being picked up from the school from someone besides their parent of legal guardian.

**Parent/Guardian Signature Date**

**Parent/Guardian Signature Date**

**SCHEDULE AGREEMENT CONTRACT**

**Terms:**

1. I understand that enrollment and days reserved for care are at a first come first served basis.
2. I understand that the days I have reserved with the provider can only be changed by the approval of the director.
3. I understand that adding days to my child’s current program, or the switching of the days, depends on the school’s current space availability.
4. I understand that the school allows for occasional request for my child to add a drop-in day. I understand that this requires approval from the director and must be done with a 2-week prior approval notice. I also understand
5. I understand that my child must arrive to school by 9:00am.
6. I understand that my child must be picked up from the school at \_\_\_\_\_\_\_\_\_\_\_\_
7. I understand the school is closed for the holidays outlined in the parent handbook.
8. I understand that the school may close due to harsh weather conditions.

**Parent/Guardian Signature Date**

**Parent/Guardian Signature Date**

**PAYMENT POLICIES AGREEMENT CONTRACT**

**Terms:**

1. I understand that the tuition pricing for my child is \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ per week, The days my child is enrolled is \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.
2. I agree and will pay my child’s tuition of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ per week.
3. I agree and will pay my child’s tuition through Cash App, CHECK, Apple pay or Zelle.
4. I understand there is a late payment penalty fee of $10 per day, per child.
5. I understand that if I have 3 late payments of tuition in one consecutive year, that my child may be discharged from the program.
6. I understand that there is a payment return fee of $25, for any tuition payment that has bounced back or returned.
7. I understand that tuition is evaluated on a yearly basis.
8. I understand that the school does not offer tuition refunds for absence fees, vacations, or sick days.
9. I understand the school is closed for the holidays outlined in the parent handbook and I will not receive a refund or a discount for these days.
10. I understand that the school may close for harsh weather conditions to ensure the safety of all students and staff. I understand that no discounts are given for such events.
11. I understand my child will be immediately discharged for any nonpayment situations for care.

**Parent/Guardian Signature Date**

**Parent/Guardian Signature Date**

TUITION AGREEMENT

|  |  |  |  |
| --- | --- | --- | --- |
| Student’s Name: | First | Middle Last |  |
| Parent/guardian name: | First | Middle Last |  |
| Parent/guardian name: | First | Middle Last |  |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Starting Month: | | | | | | | | | |
|  | Sunday | Monday | Tuesday | | Wednesday | | Thursday | Friday | Saturday |
|  | | | | | | | | | |
| Fee: per:  Hour Day Week Month | | | | Date payment due: | | | | | |
| Source of payment: Parent Other (specify): | | | | | |
| Overtime rate: per | | | | | | Late fee: per | | | |

* I agree to promptly notify the school of any changes of the above information.
* I understand that I am responsible for the terms of this agreement.
* I understand and comply with all policies and procedures

**Parent/Guardian Signature Date**

**Parent/Guardian Signature Date**

**WITHDRAW AND DISCHARGE AGREEMENT CONTRACT**

**Terms:**

1. I understand I must supply a 30-day written notice to withdraw my child from the school.
2. I understand that I will not receive the tuition deposit refund if I did not supply a full, 30-day withdrawal notice.
3. I under the school has a right to terminate my child’s enrollment under specific circumstances which are outlined in the parent handbook.
4. I understand that many attempts will be made prior to discharging my child from the school.
5. I understand it is my duty as the child’s parent or legal guardian to work with the school on the measures they implement before discharging my child.
6. I understand that the school and its staff reserve the right to determine any disputed factual matters regarding termination of enrollment.

**Parent/Guardian Signature Date**

**Parent/Guardian Signature Date**