

# CHILDCARE / AGREEMENT

I am contracting with Cradle 2 Crayons for Childcare for the following children

\_\_\_\_\_ Date of Birth  
 (Child's name)

\_\_\_\_\_ Date of Birth  
 (Child's name)

**Terms of our agreement are as follows:**

**This contract is valid from: \_\_\_\_\_ to \_\_\_\_\_**

**Registration fee: \$20(annual, non refundable fee)**

**My fee will be \$ \_\_\_\_\_  wee  Bi-weekly  Month**

**For the days and hours of;**

Monday		Tuesday		Wednesday		Thursday		Friday		Saturday	
From	To	From	To	From	To	From	To	From	To	From	To

**Late fee (after first 10 min) \$1.00 per minute**

Fees are payable in advance. They are due no later than drop off time at the Beginning of each week. If payment is not made on the first day of the week a \$25.00 dollar late fee will be charged to your account.

**BOTH PARENTS MUST SIGN OR PARENT/GAURDIAN WITH SOLE CUSTODY OF THE CHILD:**

# PERSONS AUTHORIZED TO PICK UP MY CHILD

*I am giving my permission to Cradle 2 Crayons Child Care to release my child to the following people. (I must inform prior to pick if anyone other than parent will pick up child)*

**In the event that there is a change, I will notify Cradle 2 Crayons Child Care immediately.**

**Name** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Name** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Name** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Name** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Name** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Name** \_\_\_\_\_ **Phone:** \_\_\_\_\_

\_\_\_\_\_  
**Parent/Guardian** **Date**

\_\_\_\_\_  
**Parent/Guardian** **Date**

I will not under any circumstances release your child into the custody of anyone other than his or her parent or legal guardian, as indicated by the signatures on the contract. If you wish to have anyone else pickup your child, YOU will need to call me or tell me when dropping off your child. If that person is not listed, in your children’s emergency contact information. In the event of an emergency, I will attempt to contact you and/or your spouse, or the child’s other legal guardian, or other adult listed on your emergency contact form for approval. In any case, if I am not familiar with the person, I will require a valid photo ID card from an authorized government agency (such as a driver’s license) as proof of identification before I will release the child into their custody. **Please advise anyone who may pick-up your child not to take offense to this pick up policy**

# Child Information Form

Child's full name:	Childs nickname:(if any):
Primary address:	Secondary address (if any):
Age:	Date of birth:
Medications(if any)::	
Known allergies (if any):	
Dietary restrictions(if not related to allergies):	
Physical health restrictions(such as reduced outdoor activity due to asthma):	
Does your child have any special need? please explain:	

The above information is accurate to the best of my knowledge

Parent (please print)

Signature

Date

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

# Parent Information

**Mother / Guardian Full Name**

\_\_\_\_\_

**Home Address** \_\_\_\_\_ **Home Phone** \_\_\_\_\_

**E-Mail address** \_\_\_\_\_

**Work Address** \_\_\_\_\_ **Work Phone** \_\_\_\_\_

**Place of Employment** \_\_\_\_\_

**Father / Guardian Full Name**

\_\_\_\_\_

**Home Address** \_\_\_\_\_ **Home Phone** \_\_\_\_\_

**cell phone** \_\_\_\_\_

**Work Address** \_\_\_\_\_ **Work Phone** \_\_\_\_\_

**Place of Employment** \_\_\_\_\_

**Child Lives With:**

**Mother** \_\_\_\_\_ **Father** \_\_\_\_\_ **Both** \_\_\_\_\_ **Other** \_\_\_\_\_

**Initial** \_\_\_\_\_



## SICK CHILD POLICIES

This daycare is a **well child** family daycare facility. This means that if your child is not feeling well, for any reason, you will need to find alternate care. Please do not bring your child if he/she has a contagious illness or exhibits any of the following symptoms: **You need to pick your child up after I call you within 1 hour.**

- Fever of 100 degrees or above
- Vomiting, in excess of typical infant spit-ups
- Diarrhea that is excessive
- Conjunctivitis ("pink eye")
- Consistent complaints of ear or stomach pain
- Bleeding other than minor cuts and scrapes
- Excessive greenish nasal discharge, indicating possible infection
- Head lice
- Any other Contagious disease
- Any runny nose followed by a cough

If your child becomes ill during daycare, you will be phoned at work and asked to pick your child up immediately. **(No later than 1 Hour from when I notify you of child's illness)**

If you can't pick up your child, you will need make arrangements for someone else to pick up your child.

If not on emergency list you will have to notify me who will be picking up your child.

If your child has a common cold (slight cough, sneezing, clear runny nose and/or a temperature below 99 degrees) your child may attend daycare. However, if your child reaches a point when he/she requires constant attention, will not play, cries continuously, whines and wants to be held constantly, and then your child will need to stay home.

Any child requiring prescription medication will need to be kept at home for a period of at least 24 hours until no longer contagious, unless accompanied by a signed note from the child's medical practitioner.

Please dispense all medications at home whenever possible. For times when this is not possible, a **Medicine Consent Form** must be filled out in order for me to dispense any medications. **All** prescription *and* over-the-counter medications must be in their original container(s), and prescriptions must display the pharmacist's label with the doctor's name. In addition, a signed note must accompany all prescriptions prescribed from the child's parent. If you have any questions, please feel free to discuss them with me at any time.

**Please notify me ASAP if you child/ren or family members get any contagious disease.**

Initial \_\_\_\_\_



# TUITION AND HOURS OF CARE:



Tuition rates are for normal daycare services. If your child has more needs prices will need to be adjusted.

My services will be available Monday through Friday Adjustable hours

**Fulltime:** up to -45 Hours a week over 45 hours will cost \$2 more hour per child

**Infants/Special Needs (birth to 2years) \$150 per week**

**Toddlers / Preschoolers(2-4 years) \$135 per week, school age kids \$100 during summer**

**FULL TIME -Both Before and after school care (ages 5 and up only) \$100 per week**

**Part time toddler/preschoolers: 25 or fewer hour's week**

**\$75.00 per week ~I only will take part time rarely for children under 5 years.**

**PART TIME -Before school or After-school care: (ages 5 and up only) \$15 per day for before school and \$15 per day after school.**

Pre k that attends half day in school cost is \$100 if potty trained or \$110 if not potty trained,

**½ Day Pre K -I won't charge extra to transport, but you must pay full time fees. Transportation is a first come serve basis.**

**Yearly supply /Enrollment fee \$20/year due on enrollment date with also deposit as in contract.**

**Occasional: Drop In \$35 per full day (Not to exceed 9 hours day per these prices)**

I do have brief contract for short term care that needs to be filled out prior to me caring for your child (ren).

**Late fees of \$1 per minute will be billed if you are late past the normal pick up time.**

Initial \_\_\_\_\_

## **PAYMENT TERMS:**

In the unlikely event of a returned check, I will require a \$30 service charge in addition to the repayment of any extra bank charges I may incur as a result of the inconvenience. Subsequent payments will need to be made in cash or money order. **A late fee of \$10.00 per day** will be applied as in your contract. If you need to be late PLEASE talk with me prior to due date. If you are late past 2 days, daycare services can and will stopped until payment is made. Unless PRIOR arrangements have been made in advance. If you are late more than two times, may cause termination of my daycare services. *If I am closed on our scheduled daycare tuition due date of Fridays, Tuition is due by last day open for that week, may post date your check for Friday.* . In order to provide my own family with a stable financial situation, **I cannot offer any discounts for days your child is not in my care, such as when you are on vacation, days when your child is ill, or other days when you choose not to bring your child.** Though I realize daycare is a major expense for most working parents, I also rely on this business to help support my own family. Since I will be holding your child's space for you to use at will, I need to charge for fulltime whether you use it or not. Rare exceptions may be made at my discretion for extreme circumstances. If you request, you may receive a written receipt for each individual payment of tuition and supplies fees. In January of each year, I will provide you with a summary of all fees paid for the previous calendar year. I will also provide you with a proper tax form showing my taxpayer ID number and the full amount of any charges for the previous calendar year so you may claim this expense on your taxes. If you are an **FIA contracted client.** You are responsible for any daycare services not covered under your FIA Child Service Plan. Also any yearly supply /enrollment fees that your FIA child care plan will not cover **payable prior to entering daycare.**

**TAXES-** I will supply you with a year-end summary of all daycare fees paid during the year for tax purposes. This will be given to you in January each year .You may request a statement at any time.

Initial \_\_\_\_\_

## **HOLIDAYS, VACATION AND PROVIDERS SICK-DAYS:**

Although I will do my very best to be available every business day, it is conceivable that I may be forced to close occasionally due to vacation, illness, or other emergency. I realize your need for reliable daycare and I will attempt to give as much notice as possible whenever I must close for any reason.

**I will be closed on the following major holidays**

**Highlighted teal:**

~New Years Day/New Years Eve fall on Saturday, Off  
Friday **Dec 31<sup>st</sup>**

falls on Sunday, Off **Monday Jan 3<sup>rd</sup>**

~Memorial Day, **Mon. May 30<sup>th</sup>**

~ July Forth, falls on Saturday will take **Friday July 3<sup>rd</sup>**

~ Labor Day, **Monday Sept. 5<sup>th</sup>**

~ Thanksgiving Day Thru the \after Thanksgiving,  
**Thursday Nov. 24<sup>th</sup> & Friday Nov.25<sup>th</sup>**

~ Christmas Eve/ Christmas Day falls on Saturday.  
Will take **Friday Dec.23<sup>rd</sup>**

~Christmas Day/ Christmas Eve falls on Sunday will  
take **Monday Dec. 26<sup>th</sup>**

~**Martin Luther King Day**

If the Holiday falls on a weekend I will take the following Monday or Friday before. I will also take seven **(7) additional days of vacation**, but only **with at least two (2) weeks written notice**.

*All of these days are paid (except when I close for my vacation)*

Initial \_\_\_\_\_



## TERMINATION OF CARE:

Either party may terminate our contract at any time for any reason with proper notice. According to the contract, proper notice will consist of written/verbal notice to the provider not less than two weeks prior to the child's last day of care.

regular tuition charges will apply for the remaining time your child is in care. If at any time, after consultation with the parent or guardian, I feel that you or your child pose a safety risk to myself or any of the children in my care, I will give you as much written notice as possible that care is terminated. This action will be reserved for extreme cases only, and I will first attempt to resolve any issues with you before resorting to termination of care. Under these conditions, forfeiture of the deposit will be at my discretion.

**All new contracts are under a 2-week trial period (unless otherwise stated in contract) that either party can cancel.**

**I reserve the right to terminate for the following reasons (but not limited to):**

- \* Lack of compliance with handbook regulations
  - \* Failure to pay or pay on time
- \* Failure to complete required forms
  - \* Lack of parental cooperation
  - \* Disrespect
- \* False information given by parent either verbally or in writing
  - \* Consistent late arrivals disrupting our routine
- \* Failure of child to adjust to the child care after a reasonable amount of time
- \* Physical or verbal abuse of any person or property
  - \* My inability to meet the child's needs
  - \* Serious illness of child or provider

I appreciate as much advance notice as possible when terminating, and will give the same courtesy in return. You are required to give two-week's notice when you decide to terminate childcare per our contract. **Likewise, I will give two-week's written notice of termination for which full tuition is due, whether or not your child is in attendance.** I reserve the right to give written notice of immediate termination where there are extreme circumstances that affect the well being of myself or other children in attendance.

**REVISIONS TO HANDBOOK & CONTRACT** There will be a yearly revision to this handbook (Every January or before) and the accompanying contract on renewal date. All families will sign a new contract each year. I reserve the right to make changes in rates and policies, as I deem necessary. You will be notified, in writing, of any changes that may occur. Prices changes will not change during your contract

Initial \_\_\_\_\_

# General Transportation & Field Trip Permission Form, Long Term

As parent or guardian of \_\_\_\_\_, I give permission to Cradle 2 Crayons Childcare

**>>> Please initial the items you agree to. All parents and guardians must sign at the bottom.**

\_\_\_\_\_ Walks, in the neighborhood, parks

\_\_\_\_\_ Trips in the day care van or car. Such trips are frequent, often unannounced. Children always use a car seat or seat belt, with booster seat, as age appropriate. All trips will be closely supervised. Trips in a van or car belonging to a trusted volunteer (usually a parent) or employee.

\_\_\_\_\_ Trips in a van or car belonging to a trusted volunteer (usually a parent) or employee. Children always use a car seat or seat belt. Such trips will be closely supervised.

**All parents and guardians must sign.**

\_\_\_\_\_  
(Signature) (Date)

\_\_\_\_\_  
(Signature) (Date)

## Permission to Apply Lotions, Ointments, and Powders

As parent or guardian of \_\_\_\_\_, I give Cradle 2 Crayons Child Care permission to apply the following selected protective or medicinal materials.

**>>> Please initial the items you agree to. All parents and guardians must sign at the bottom**

\_\_\_\_\_ Insect repellent, applied only when necessary. We use a moderate strength repellent, such as Off Skintastic®. We often apply more repellent to clothing than to skin.

\_\_\_\_\_ Diapering ointment, such as zinc oxide or A&D®, to prevent or treat diaper rash.

\_\_\_\_\_ Antiseptic cream or ointment, such as Bacitracin®, for minor cuts and abrasions, to prevent infection, and to sooth or ease pain.

\_\_\_\_\_ Petroleum jelly or hand cream, to prevent and treat dry skin on hands or face.

\_\_\_\_\_  
(Signature) (Date)

\_\_\_\_\_  
(Signature) (Date)

# Enrollment Checklist

- \_\_\_\_ \_\_\_\_ I/we agree to give a 2 weeks (10 working days) notice of  
My/our intent to withdraw my/our child/ren from the childcare
- \_\_\_\_ \_\_\_\_ I/we understand that we must provide a completed medical  
Form to Wanda
- \_\_\_\_ \_\_\_\_ I/we understand the medical policy, and that Wanda must have a copy of my  
child's immunization records.
- \_\_\_\_ \_\_\_\_ I/we understand that payments are due on Monday for the  
Upcoming period my child is in care. Late fees are \$15 a day.
- \_\_\_\_ \_\_\_\_ I/we have contracted for the hours of \_\_\_\_: \_\_\_\_ to \_\_\_\_: \_\_\_\_
- \_\_\_\_ \_\_\_\_ I/we understand the late policy.
- \_\_\_\_ \_\_\_\_ I/We understand the illness policy
- \_\_\_\_ \_\_\_\_ I/We understand that I will be responsible for finding back-up care  
for when daycare is closed .
- \_\_\_\_ \_\_\_\_ I/We understand the pickup policy for anyone other than parents.
- \_\_\_\_ \_\_\_\_ I/We understand the vacation policy.
- \_\_\_\_ \_\_\_\_ I/We understand the behavior policy, and have shared the rules with  
my/our child/ran
- \_\_\_\_ \_\_\_\_ I/We understand the returned check policy.

By signing below, you agree that this is a legally binding form, and that you agree to adhere to all of the policies listed above as well as in the parent handbook. Failure to abide by these policies could result termination of childcare services

Mother/Guardian's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Father/Guardian's Signature: \_\_\_\_\_ Date: \_\_\_\_\_