



Contract for child care between \_\_\_\_\_ Child Care and \_\_\_\_\_

PARENT FIRST AND LAST NAME(S) - PLEASE PRINT

I have reviewed the Fee Schedule and Fees and Payments Policy in the Parent Handbook. I am contracting for the number of days listed below and agree to pay the weekly charge whether or not my child attends day care. I understand that payment is due weekly on Friday for the following week's service and that a \$25 late fee will be charged on Wednesday for accounts not paid in full. I understand I may use credit days (see A below) only for days my child does not attend.

CHILD(REN) FIRST AND LAST NAME		NUMBER OF DAYS CONTRACTED	RATE PER DAY	RATE PER WEEK
	INFANT FULL DAY			
	TODDLER FULL DAY			
	PRESCHOOL FULL DAY			
	PRESCHOOL ONLY			
	KINDERGARTEN - BEFORE SCHOOL			
	KINDERGARTEN - AFTER SCHOOL			
	SCHOOL AGE - BEFORE SCHOOL			
	SCHOOL AGE - AFTER SCHOOL			
	SCHOOL AGE - EARLY RELEASE			
	SCHOOL AGE & KINDERGARTEN FULL DAY			
	DROP-IN CARE			
	DSHS CO-PAY AMOUNT		# DAYS PER WEEK	
	DSHS NO CO-PAY IS REQUIRED PER DSHS		# DAYS PER WEEK	

A. NUMBER OF CREDIT DAYS \_\_\_\_\_ FOR THE PERIOD FROM \_\_\_\_\_ TO \_\_\_\_\_. EACH FAMILY WILL BE ALLOWED UP TO A MAXIMUM OF 15 CREDIT DAYS PER CHILD PER YEAR BASED ON THE NUMBER OF CONTRACTED DAYS AND THE NUMBER OF YEARS ENROLLED.

B. ALL ADJUSTMENTS FOR CREDIT DAYS, EARLY RELEASE, NO SCHOOL DAYS, AND DAYS IN ADDITION TO CONTRACTED DAYS WILL BE MADE THE WEEK FOLLOWING SERVICES RECEIVED. PARENT INITIALS:

C. I HAVE REVIEWED THE PARENT HANDBOOK IN ITS ENTIRETY INCLUDING THE DISCIPLINE POLICY, AND HEREIN AGREE TO ABIDE BY ALL OF THE POLICIES AND PROVISIONS CONTAINED HEREIN.

\_\_\_\_\_  
PARENT SIGNATURE DATE

\_\_\_\_\_  
DIRECTOR SIGNATURE DATE

