



Child Care Agreement

Child's Name:	First	Middle	Last		
Parent or Guardian name:	First	Middle	Last		
Parent or Guardian name:	First	Middle	Last		
Check Days of Care	<input type="checkbox"/> Monday	<input type="checkbox"/> Tuesday	<input type="checkbox"/> Wednesday	<input type="checkbox"/> Thursday	<input type="checkbox"/> Friday
Arrival Time	_____	_____	_____	_____	_____
Departure Time	_____	_____	_____	_____	_____
Fee: (check one) <input type="checkbox"/> 5 days @ \$380 week (\$400 12-30 months/not potty trained) <input type="checkbox"/> 3 days @ \$350 week (\$380 12-30 months) <input type="checkbox"/> A.M. care @ \$350 week (5 hours) (\$380 12-30 m) <input type="checkbox"/> P.M. care @ \$350 week (5 hours) (\$380 12-30 m) <input type="checkbox"/> DCYF Subsidy <input type="checkbox"/> CCAA Subsidy – (See CCAA contract addendum)			Payment: Payment is due Friday in advance of the week of care. Late Fee: A late charge of \$70 will be assessed if payment is not received by Monday at 6pm. If payment is not received by Tuesday care will be discontinued. Late Pickup: A \$45 late fee will apply if a child is picked up after 6pm. After 6:10pm an additional \$5 per minute will be charged.		

I agree to promptly notify Little Scholars Early Learning Center of any changes to the above information. I understand that I am fully responsible for the terms of this agreement as stipulated. I agree to give a minimum of 2 weeks notice before discontinuing childcare at Little Scholars Early Learning Center. I further agree that any past due child care fees will be paid before discontinuing childcare.

I have read, understand and agree to comply with the policy and procedures and information for parents given to me by Little Scholars Early Learning Center.

Parent or Guardian Signature Date Parent or Guardian Signature Date

I agree to provide the childcare services according to the above plan. I agree to promptly notify the parents or guardians of any changes to the above information.

Director Signature Date

8202 Steilacoom Blvd SW Lakewood, WA. 98498 (253) 327- 1822 office

Comments:

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Addendum

Vacations:

Planned absences and/or vacations will be charged a holding rate of one half of regular pay. All planned absences require a 14 day notice to the center to qualify for the holding rate. Any notices received after this period will be charged the regular rate.

Enrollment fee:

An enrollment fee of \$150 is due upon enrollment. Thereafter a \$150 fee will be charged every September to renew enrollment.

Additional Care:

If additional care is needed beyond the amount agreed to in this contract it will be discussed and approved in writing by management.

I have read, understand, and agree to comply with the policy outlined in this addendum to my childcare agreement with Little Scholars Early Learning Center.

Parent or Guardian Signature Date

Parent or Guardian Signature Date