



## KIDLAND FAMILY DAYCARE AGREEMENT

### TELL US ABOUT YOUR CHILD

First Name

Last Name

Nickname

Gender

Language spoken at home

Please list family members names  
your child live with including siblings

### TELL US ABOUT YOU

The safety of children is our top priority. Daycare staff will release your child only to the parents and guardians listed—or to the other emergency contacts you authorize below. If you do need to authorize a new pickup person by phone, you may do so—but we will ask you to answer the two security questions you provide here to verify your identity. For your child's safety, any time a person we do not recognize comes to pick up your child, we will ask for a government-issued photo ID.

#### Parent / Guardian 1

First Name Last Name

Cell Phone Email Address

Home address

Employer Name & Address

DL number and state

Relationship to child

**Parent / Guardian 2**

First Name Last Name
Cell Phone Email Address
Home address
Employer Name & Address
DL number and state
Relationship to child

**Security Questions**

<b>Question 1.</b>
<b>Answer</b>

<b>Question 2.</b>
<b>Answer</b>

**WHO ARE EMERGENCY CONTACTS AUTHORIZED TO PICK UP YOUR CHILD (18 or older)?**

**Authorized Emergency Contact**

	Authorized Emergency Contact 1	Authorized Emergency Contact 2	Authorized Emergency Contact 3
Name			
Relationship			
Address			
Phone			
Alternate Phone			

**I will notify the center on days when an authorized “Emergency Contact” will pick up my child.**

Office Use Only:
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**CARE INFORMATION Child’s Name**

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Height	Weight	Eye Color	Hair Color

Our goal is to provide your child excellent education and care. We have a few questions that will help us be better prepared to meet your child’s individual needs. Please indicate if your child receives any of the following supports:

Physical therapy  Speech therapy  Occupational therapy  Other:

Applied Behavior Analysis  Mobility device  Communication

device  Feeding tube  Visual support  Auditory support

Is there anything else we need to know about your child to ensure he or she can be well supported by our staff?

<b>MY CHILD’S MEDICAL CARE PROVIDER</b>
Medical Care Provider name Practice / Clinic name
Provider’s Address
Phone
Preferred hospital /clinic
Health Insurance Provider and policy number

<b>MY CHILD’S ALLERGIES</b>
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Food Reaction
Medication Reaction
Other

Are any of the allergies severe or life-threatening? Yes No **(If yes, please talk to your Director about completing an allergy plan.)**

**Medication** I will provide written permission for center staff to administer medication with written instructions from me or the child’s health care provider, as permitted by local child care licensing regulations. I will complete and sign authorization forms. I will provide the medication in its original container (with the pharmacist’s label for prescriptions).

**Immunizations** I will provide the center with updated immunization information or an exemption for my child.

**Nurse/Health Consultant** Child care centers in some states are required to engage the services of a Nurse/Health Consultant to review health policies and procedures and children’s records. I agree my child’s records may be reviewed by the nurse/health consultant.

**Illness** If center staff notifies me that my child is ill, I will pick up my child as soon as possible and no later than one (1) hour after being contacted. If my child contracts a contagious illness, I understand that my child may return only when he or she is well, as described in the Family Handbook.

**Emergencies** In case of an emergency, I understand that center staff will attempt to contact me immediately. I also authorize center staff to:

- Consult the physician or dentist named above.
- Administer first aid and/or cardiopulmonary resuscitation.
- Transport my child via ambulance or other emergency medical service to a local hospital or other urgent care facility.
- Obtain any emergency medical, surgical or dental treatment deemed necessary by medical authorities.
- Transport my child to a local emergency shelter in the event of an emergency evacuation of the center.

**Daycare Hours**

The daycare is open Monday through Friday **8:30 am to 6:00pm** with the following holiday exceptions:

## Holidays

- Martin Luther King Day
- Lincoln Day
- Washington Day
- Good Friday
- Memorial Day
- Juneteenth
- Summer Break (First Week Of July)
- Labor Day
- Columbus Day
- Veteran's Day
- Thanksgiving Day
- Day after Thanksgiving
- Last 2 weeks of Dec and New Years Day (Christmas Break)

Note: If the holiday falls on a Saturday daycare will be closed the Friday before. If the holiday falls on a Sunday daycare will be closed the Monday after.

## **Sick/Personal Days**

As robust as our immune system has become over the years, we unfortunately still get sick from time to time. Because of this we allot ourselves 3 sick/personal days per year. We also use these days for our continuing education classes (CPR, Pediatric First Aid, etc) in order to keep our childcare license in good standing. Of course we will give you as much of an advance notice as possible.

## **Vacations**

We allot ourselves 2 vacations during the fiscal year

One week of vacation is scheduled on the week of July 4th

The second vacation is included in Christmas Break for the last 2 weeks in December

Regular payment rates apply for our vacations, your vacations, weeks with holidays, and provider's sick days.

Note: Parents are responsible for finding back-up care for their children during provider vacations, holidays, and sick days resulting in the daycare closing.

## **Deposit, Tuition, late fee and financial Obligations**

### **Deposit**

A nonrefundable deposit equal to two weeks of childcare costs is due at the time of enrollment. However, do not give us the deposit until you have signed the Parent-Provider Contract/Enrollment application and thoroughly read the parent handbook. Your child's spot is not secured until we have received both the deposit and the signed Parent-Provider Contract/Enrollment application. The deposit will be credited towards the last two weeks of your child's enrollment.

Note: **All Payments are made towards "Kidland"**

### **Tuition Payment Policy/Attendance**

Payment is due within the first three business days of each month or on the first day of the

month attending daycare.

If received after the third business day of the month a \$40 late fee will be charged for each day.. It must be understood that to hold your child's space, payment must be paid whether your child attends or not. Payment is based on contract, not attendance.

Your daycare tuition will change under the following circumstances

(1) When graduating from Infant/Young Toddler class (0–2 yrs) to Older Toddler/Preschool class (2 yrs +).

(2) When changing contracted days of attendance.

(3) Stopping and then restarting paid attendance in our daycare. In all scenarios your new payment will default to the current price of the newly enrolled schedule

(4) The center increases the tuition fee for all students with 60 days advance written notice

**Part-Time Schedules:** Unfortunately, we cannot switch around your child's scheduled days of enrollment on an occasional or semi-occasional basis. In other words, your days contracted are your days and cannot be altered on a weekly basis. If you feel you need and/or want a more flexible schedule then you may want to consider adding days or going to full time. However, keep in mind you can also pay for extra days on an as needed basis for the cost of your current average daily amount (e.g. If you pay \$130 per week each additional day would be \$65 per).

### **Late Fee:**

If your child is picked up after **6:00** pm there will be a late charge assessed of \$1.00 for every one minute. Please be courteous and arrive on time. After hours is time with our family.

### **Trial Period and termination notice**

The first 15 days will be regarded as a trial period, in which case either party may terminate the contract without notice. After the first 15 Days of enrollment, a 30 Day written notice from parent or provider is required to terminate the contract (**a 45 days notice required for month of December**), with the exception of gross misconduct on part of the provider, parent, or child. This is grounds for immediate discontinuation of service. In cases of non-payment, legal action may be taken, and the parents will pay all legal fees incurred.

### **Advance Notice Requirement and Financial Obligations**

Whenever possible even more notice is better and a 30 day written notice is required any month except December. 45 days notice is required for all termination during the month of December due to the holiday closure. This helps us run our daycare efficiently. Reason being, unlike childcare centers we can only care for a limited amount of children. So when we are full we are forced to say NO to all incoming requests for childcare. When we have advance notice of discontinuation of needed services then it is possible for us to make future arrangements with new family's inquiring about daycare for their child and keep the daycare staffed appropriately for optimum care. This helps to keep our openspots fluctuation to a minimum, and helps us be able to focus more on being the best childcare providers we can be.

If you will no longer be needing our childcare services, 30 Days (\*45 days for December) advance

written notice needs to be sent via email to [kidlandfremont@gmail.com](mailto:kidlandfremont@gmail.com) and if you do not give us the above mentioned written notice of withdrawal, you agree to pay full tuition and fees due for the final 30/45 days as applicable regardless of your child's attendance.

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I \_\_\_\_\_ (**PRINT NAME**) As the parent/guardian signing the Enrollment Agreement all amounts due are ultimately my responsibility. Overdue accounts may be referred to a collection agency. I am responsible for all account balances, plus reasonable collection and attorney fees associated with the collection of the account. Payments from families with prior unpaid returned checks must be in the form of a money order or cashier's check. Families with returned check activity may be subject to immediate termination of services. Any prepaid balance of \$25 or less which remains at the time of my child's disenrollment will not be refunded unless requested in writing within 90 days. Thirty days written notice is required prior to the last day of attendance. If I do not give thirty days written notice of withdrawal, I agree to pay full tuition and fees due for the full month regardless of my child's attendance.

I have read, understand and accept all of the terms in this Agreement. I will promptly update any information provided for in this Agreement if any information changes. Center management does not have the authority to change the terms of this Agreement (other than inserting information where required either verbally or in writing. The terms of this Agreement, including the tuition and fees, are subject to change in whole or in part by the center with 60 days notice.

PARENT/GUARDIAN'S SIGNATURE: \_\_\_\_\_ DATE \_\_\_\_\_

PROVIDERS SIGNATURE \_ \_\_\_\_\_ DATE \_\_\_\_\_