



CHILD CARE CONTRACT

Name of child: _____ Date of birth: _____

My child will attend **Little Sprouts Preschool & Childcare** the following times:
(Please note a minimum of two days is required)

- Monday _____ AM to _____ PM
- Tuesday _____ AM to _____ PM
- Wednesday _____ AM to _____ PM
- Thursday _____ AM to _____ PM

Monthly Tuition \$ _____ (See Tuition and Fee Schedule)

Drop In: If care is needed on any days other than those indicated above, it will be considered drop in and will be contingent on space available – you must contact me ahead of time to ensure space is available. The only way to secure your child’s spot is to contract out for those days. *Drop in days will be added to your billing statement for the following month and will be billed at \$38.00/Day.*

Start Date: ____/____/____

Any permanent changes to your child’s schedule must be made one month in advance, on or before the first of the month, and a new contract must be completed.

Tuition and Fees: Tuition is not based on your child’s attendance - no refunds will be given for late arrivals/early departures, days missed due to lack of payment or absences due to illness, vacations or inclement weather.

Childcare tuition shall be \$ _____ per month. (See Tuition and Fee Schedule)

Tuition is to be **prepaid** bi-weekly or monthly

On the 25th of each month you will be given a child care statement with the total amount due for the following month. Your statement will reflect any additional days or days credited. You have the following payment options:

(Check which option works best for your family)

- Monthly** – Payment is due on the first business day of each month.
- Bi-Weekly** – ½ Monthly Tuition is due on the 1st and 15th of each month.

If the payment date falls on a weekend, holiday or another day that Little Sprouts is closed, payment will be due the last business day your child is in care.

If you wish to change your payment due date, you must give me one month’s notice and a new contract must be completed.

Late Fees: A late fee of \$10.00 per day shall be assessed to any payment amount not paid when due. Your child will not be able to attend until their tuition and any late fees are paid. If your child is unable to attend due to non-payment, your slot will not be held.

Insufficient Funds: The fee for an insufficient funds check is \$35.00 plus any bank charges to my account.

Parent Initials _____

Rate Increases: Parents will be given a one month written notice for any rate increase.

Overtime Rates: Little Sprouts closes at 5:00 however I allow parents until 5:15 before late charges are assessed. If pick up is made after 5:15 pm there will be a \$1.00 per minute late charge added to your next bill.

Provider Absences: In the event that Little Sprouts is closed due to my own illness, the illness of one of my family members, or another personal emergency you will be notified as soon as possible and you will be responsible for alternate care for your child. Should I need to be closed for a personal illness or personal emergency your account will be credited for the days that I am unavailable.

Closure Due to Inclement Weather: In the event that Montrose County School District RE-1J Schools are closed due to weather, I will also be closed. Please check with local media announcements to verify the closure of these schools. You *will* still be charged for these days since they are beyond my control.

Holidays and Vacations: You will be given a holiday/vacation calendar June 1st of each year. The following 7 holidays are paid holidays; Labor Day, Thanksgiving, Christmas, New Year's Day, President's Day, Memorial Day and Independence Day. Monthly tuition has been calculated so that you are not charged for any other days that Little Sprouts is closed.

You will be responsible for finding alternate care for your child when Little Sprouts is closed.

Extended Leave: In cases of extended leave (longer than one month and up to three months) due to maternity leave, summer break, or extended leave from your job, you will be required to pay the minimum monthly tuition (2 days/week) for the entire time of your absence to hold your child's position.

Deposit: A deposit in the amount of \$ _____ (1/2 Monthly Tuition) is due prior to your child beginning care at Little Sprouts. This deposit will be applied to your last bill provided one month's written notice is given on or before the first of the month to terminate this contract.

Activities Fee: An activities fee of \$50.00 to help pay for materials and supplies will be due upon enrollment and once each semester after that. Activity Fees are due on August 1st and January 1st.

Parental Termination of Contract: One month's written notice, on or before the first of the month shall be required by the parent to Little Sprouts Preschool & Childcare to terminate this contract. Payment is due for the notice period regardless of whether or not your child is brought to me for care during that time.

Little Sprouts Preschool & Child Care Termination of Contract: Little Sprouts Preschool & Childcare will provide the parent(s) with two weeks written notice if Little Sprouts Preschool & Childcare is no longer able to care for your child. Termination under this provision is at the sole discretion of Little Sprouts Preschool & Childcare. Payment is required regardless of whether the child attends or not. Little Sprouts Preschool & Childcare retains the right to terminate childcare arrangements for the following reasons *without* notice:

- Nonpayment as required in this agreement.
- Failure to comply with the policies of Little Sprouts Preschool & Childcare
- Failure to comply with this contract
- Failure to complete or update required paperwork
- Destructive or hurtful behavior of the child that persists
- Failure to show up for 5 days in a row without any communication
- Inability to meet the child's needs

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Signatures:

By signing this contract, you acknowledge that you have read my policies and agree to follow them. I may amend my policies at any time by giving you a copy of the new policies at least two weeks before they go into effect.

A failure to enforce one or more terms of this contract does not waive the provider's right to enforce any other terms of this contract.

Parent or Guardian Signature _____ Date _____

Provider's Signature _____ Date _____