

**TINY TREASURES PARENT-PROVIDER CHILD CARE**

**CONTRACT License # 49563**

**Lori S \*\*\*Address Centennial, CO \*\*\*Phone Number**

**Enrollment Date: \_\_\_\_\_**

The following agreement is made between parent(s)/guardians and provider for \_\_\_\_\_ (child name) \_\_\_\_\_ (Date of Birth) for child care services.

Parent/guardian name \_\_\_\_\_ Parent/guardian name \_\_\_\_\_

Address \_\_\_\_\_ phone \_\_\_\_\_

**The terms of the agreement are as follows:**

**Effective date** \_\_\_\_\_

**Hours:** (Available hours are 7:30am to 5:30pm for standard care).

My child will usually attend from \_\_\_\_\_ to \_\_\_\_\_ on (circle all that apply) **M T W T H F**

**\*It is my practice to accept only full time care, but if accepted it will be listed in the "special provisions" lines below.**

**Fees:**

*Standard Care* is \_\_\_\_\_ per (circle one) month, week, or day.

\*This fee includes any activities, excursions. If there is a fee for a field trip, notice will be given in writing prior to the trip.

*Overtime Rates* are **\$5.00 every 15 minutes**, per child before 7:30am and after 5:30pm.

*Late charge* is \_\_\_\_\_ per day and \$25.00 for all returned checks.

*Standard/Overtime or late fee payment* is due on the first day of the week your child (children) will attend.

**Vacations/Illness:**

**All days** of non-attendance for illness and vacation time will be paid. **All holidays** (days listed in the handbook) and **1 week of the provider's scheduled vacation**, will be charged the full rate. **If the provider chooses to take any other days, there is no charge for these days as I realize you must find alternate care for your child (children).**

**Termination of Agreement:**

Either the parent/guardian of the said child, or the provider, with a two-week notice, may terminate this contract. The two-week period is **paid** regardless if the child remains in attendance. The provider can terminate the contract without giving any notice if parents or guardians do not make payments when they are due, or any part of the policies or handbook are not met.

**Yes, I agree that I/we have also read the Child Care Policy/Handbook. We understand and agree to abide by the policies within the Child Care Policy Handbook, and to abide by the terms of this agreement.**

Special provisions:

\_\_\_\_\_

Parent signature \_\_\_\_\_ Date \_\_\_\_\_

Parent signature \_\_\_\_\_ Date \_\_\_\_\_

Provider signature \_\_\_\_\_ Date \_\_\_\_\_