CONTRACT

Parents Agreement

- 1. I agree to pay for my childcare, in advance, on Monday of each week with no deductions for absences or holidays. (In cases of extended illness, special arrangements can be made.) I understand that if my account becomes over two weeks delinquent the center may terminate my childcare services.
- 2. I agree to pay fees that are charged for late payment and/or late arrival for pick up.
- 3. I agree to pay fees that will be charged when my account becomes delinquent. I understand that my account will be sent to collections or on to the prosecuting attorney.
- 4. I agree to give a written notice when terminating my need for childcare two weeks in advance of my child's last day. I am responsible for full payment of these two weeks (no free days (vacation) may be used). Failure to give a written advance notice does not relieve me of this tuition obligation. I understand that if I leave the center without notice, I will still be responsible for the tuition billed for the two weeks following my child's last day attended.
- 5. I agree to pick my child up from the center following the Missouri State *Licensing Rules for Child Care*, when one or more of the following symptoms occur:
 - a. Temperature of 100 degrees or higher
 - b. Vomiting or diarrhea of more than one episode
 - c. Pinkeye
 - d. Unexplained rash
 - e. Any symptoms that the center feels should be evaluated by a physician
- 6. I agree to read the Parent Handbook concerning the policies of the facility regarding the care of my child and will abide by the policy contained in the handbook.
- 7. I agree to set aside time to communicate with the center regarding my child's development and behavior.
- 8. I understand that a copy of *Licensing Rules for Child Care* is available at this facility and online for my review.
- 9. I understand the childcare facility is responsible for exercising reasonable care for the safety and welfare of my child while in their care. The operators are not responsible beyond the exercise of due care for accidents that may occur, either in the center or outside, including private or public conveyances.

Date:	_ Child's Name:		
Sponsor's Name:		Co-sponsors Name:	
	(Parent or Legal Guardian)	(Parer	(Parent or Legal Guardian)
Sponsor's signature	:	Co-sponsor's signature:	
. 8	(Parent or Legal Guardian)		(Parent or Legal Guardian)