## **Contract Agreement**

### **Parties Involved**

This Agreement is made between\_\_\_\_\_ (hereinafter referred to as "Provider") and\_\_\_\_\_ (hereinafter referred to as "Parent(s)").

Date of Agreement:	
Child's Name(s):	
Date of Enrollment:	

## Terms of Agreement:

## 1. Enrollment and Hours

- Hours of Operation\_\_\_\_\_
- *Drop-Off and Pick-Up Policy:* "Children must be picked up no later than the scheduled time. Late pickups will incur an additional fee of \$\_\_\_\_\_."

### 2. Fees and Payment

- *Tuition Rates:* Weekly rate of \$\_\_\_\_\_, payable by \_\_\_\_\_.
- Payment Method: Accepted methods include
- Late Payment Fee: Payments received more than \_\_\_\_days late will incur a late fee of \$\_\_\_\_].

### 3. Absences and Holidays

• *Provider Closure Days:* "The daycare will be closed on major holidays. Full payment is required for closure days as outlined above."

# 4. Health and Safety Policy

 "Parents agree to follow the health guidelines set forth by \_\_\_\_\_\_ including keeping children home when they show signs of illness such as fever, vomiting, etc."

# 5. Termination Policy

 Notice Required: "A notice period of \_\_\_\_\_\_\_ is required for termination of services by either party. Payment is expected for this notice period regardless of attendance."

### Parent Signature:

Date:

**Provider Signature:** 

Date:

# **Policy Handout**

## \_\_\_\_- Policy Handout

*Welcome to* ! Our policies help ensure a safe, happy, and organized environment for all children. Please review and sign below.

## 1. Attendance and Absences

- *Sick Days:* "Please inform us as soon as possible if your child will not be attending due to illness."
- *Absence Policy:* "Absences do not result in a refund as your child's spot is reserved specifically for them."

## 2. Health & Wellness

- *Illness Policy:* "Children who exhibit symptoms such as a fever over [temp], vomiting, or diarrhea will be sent home for the health and safety of others."
- *Medication:* "We are unable to administer medication without proper documentation from a physician."

# 3. Drop-Off and Pick-Up

• "Parents must notify us in advance if someone other than the regular guardian will be picking up their child. Photo ID will be required for any unfamiliar individuals."

# 4. Payment Policy

 "Tuition is due [weekly/monthly] on [day of the week]. Late payments will incur a \$\_\_\_\_\_\_ fee."

# 5. Communication

• "We will communicate important updates and child progress through [newsletters, parent-teacher meetings, and our app]. Parents are encouraged to reach out with any questions."

# Acknowledgment of Policy Understanding

I, \_\_\_\_\_, have read and agree to the policies set forth by \_\_\_\_\_.

# Parent Signature:

Date: