PARENT-PROVIDER CHILD CARE CONTRACT

Little Angels MDO Preschool 74-1168928

I.	The following contract is between and Little Angels MDO
	Preschool located at 1515 West Adams Avenue Temple, Texas 76504 for the children listed
•	below:
	Child's Name: DOB:
	Child's Name: DOB:
	Child's Name: DOB:
II.	
	Standard Rates and Payment Policies:
	1. An annual registration of \$90.00 is due upon enrollment of your child. This fee is then
	collected yearly before the start of each new school year.
	2. Little Angels operates on ONLY Monday and Wednesdays. Your tuition amount of
	\$ for the time frame is due on the 1" day of school each
	month (with a grace period of up to the 10th day of the month), regardless of the number of
	days child care is (or is not) provided.
III.	Policies for Absences, Vacations, and Closers:
	1. Let the school know by 8:30 AM if your child will be absent for the day from school and a
	weeks notice if your child will be gone on vacation.
	2. Vacations, absences, pandemic closures WILL NOT be prorated or refunded. You are
	responsible for payments.
IV.	Shot Records:
	1. A child will not be permitted to attend school unless a valid shot record released from the child's pediatrician is turned in by the first day of school, regardless if payment has been
	made.
	2. Failure to provide, and keep up to date, shot records will result in termination of your child
	from Little Angels MDO Preschool.
V.	Authorization for Emergency Medical Attention:
	1. In the event that our school staff cannot be reached to make arrangements for emergency
	medical care, I authorize the person in charge to secure any and all necessary emergency
	medical care for my child.
	2. I will not hold Little Angels MDO Preschool (First Lutheran Church) liable for illnesses or
	accidents that may happen during my child's stay during operating hours.
VI.	Photo Release Consent:
	Little Angles MDO Preschool is a media-friendly childcare center. Pictures we take of your
	child at school may be used on our social media.
C:	Deter
Signature:	Date:
Printed Na	me: Relationship to Child:
Signature:	Date:

(Little Angels Director)