Child Care Business Policy

HOURS AND FEES:

Child care will be provided for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ during the hours of \_\_\_\_\_\_ and \_\_\_\_\_\_. The rate of pay will be \_\_\_\_\_\_ per week. All sick days, holidays, vacations, and emergency closings are payable. The parent agrees to make an effort to contact the provider by 8:30am on days when the child is not attending.

DAMAGES:

Both the parent and the provider will make efforts to teach children to use materials carefully and to avoid damaging property that belongs to others.

THE PARENT AGREES TO:

1. Call by 5:00pm if someone else is to pick up their child and also send proper identification and a password with that person. The person picking up the child must be 18 years of age or older.
2. Give two weeks’ notice if you plan to stop bringing your child.
3. Have your child dressed and ready to play upon arrival. Provide appropriate seasonal clothing.
4. Provide alternative care in case of child being sick. Children may not be in school if they have a fever over 100˚, or have had vomiting and/or diarrhea over the previous 24 hours.
5. A late fee (after 5:30pm) of $1 per minute per child after two verbal warnings will be enforced.
6. In the event of a snow day and Manchester public schools close, we are open for working parents ONLY.

OPERATING POLICIES:

1. Ages of children accepted for care are 3 years to 12 years.
2. Meals, snacks, and beverages will be provided by the parent. Lunches can be heated up.
3. If your child is sick during the day, you will be called to pick him/her up within the hour. If during the night or weekend your child has been sick, please inform us so that we may watch him/her and notify other parent when necessary.
4. If you would like us to give medication to your child, we must have written authorization to do so. We will provide a form to be filled out by the parent for each medication. Medication should be labeled with the child’s name and date. It must be in the original container and given directly to a teacher upon arrival. Unless we have a doctor’s note, we can only administer medication according to the age appropriate dosage listed on the original container.
5. Your child is required to have a physical form and up to date immunizations on file that is dated within the last year and 60 days.
6. We ask that you update your child’s registration and business policy annually.
7. Payments must be made on Monday for that week and Tuesday if your child comes Tuesday/Thursday.
8. There is a $25 fee per returned check.
9. The state of New Hampshire requires us to inform you that during nap time, our student staff ratios will be reduced by one staff member.
10. As of June 10th 2013, you will be required to enroll your child in our summer program for a minimum of 2 full days per week in order to hold your spot for the following September.
11. The doors to the school will be locked daily from 9am until 3pm, or at the discretion of the staff.
12. Your signature provides permission for staff to apply chap stick/hand cream/sunscreen/bug spray that you provide for your child.

Thank you for your cooperation in these matters.

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PROVIDER PARENT SIGNATURE

Date signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_