

The Bay Kids, LLC

12990 Monticello Dr
Mail to: PO Box 2179
Lusby, MD 20657
410-231-2131



Part-Time Contract

Updated
January 2023

David C Houghton

CONFIDENTIAL



2023 PART-TIME CONTRACT

(two pages)

SA SP

This Agreement is made by and between
 The Bay Kids, LLC Childcare and Early Learning Center
 and

_____, Parent/Guardian of _____
 (Please Print) Parent(s) or Legal Guardian(s) Child's Full Name

The following has been agreed upon between the two above parties beginning on ____/____/____
 Date (mm/dd/yyyy)

It is my/our desire to have my/our child/children enrolled in the **PART TIME** daycare program at
The Bay Kids, LLC Childcare and Early Learning Center on these scheduled days.

 (parent initials) Monday Tuesday Wednesday Thursday Friday

Specific Hours	Mon	Tues	Wed	Thu	Fri
EnterHours					

ANY DEVIATION FROM THIS SCHEDULE MUST BE NEGOTIATED 5 DAYS IN ADVANCE TO ALLOW STAFF SCHEDULE MODIFICATION. NO EXCEPTIONS

PLEASE INITIAL NEXT TO EACH ITEM. WE WANT TO BE SURE YOU UNDERSTAND AND AGREE TO THESE POLICIES.

* _____ PLEASE BE ADVISED THAT THE INSTRUCTION DAY BEGINS AT 8:00 am.
 Your child must be checked in prior to beginning of instruction or your child will be unable to attend for the day. This ensures minimal disruption to the rest of the class as well as scheduling of staff to student ratios as dictated by MSDE regulations. Please know TBK will do whatever possible to accommodate but, we cannot call in additional staff that may be required for the additional late students. Medical, dental, or related appointments do not apply, but must be documented.

_____ I/we are contracting for year-round school year only summer only care. (Check one)

_____ I/we have received a copy of The Bay Kids, LLC Childcare and Early Learning Center Parent Handbook 2021. I/we have read, understand and agree to abide by the policies contained therein. (Subject to change **ONLY WITH** advanced notice, always with addendum provided).

_____ I/we also understand that my/our child is being accepted on a three-week trial basis. During this time, the staff will make observations and evaluations pertaining to the child's ability to adapt to our daycare surroundings. Unless otherwise notified, the child/children will be accepted and permanently enrolled.

_____ I/we also agree to give a minimum of two weeks written notice (ten full daycare days) of my/our intent to withdraw my/our child/children from the daycare program. If a two (2) week notice is not given, I/we agree to surrender full tuition deposit made as intended for the final two weeks.

_____ I/we understand that I/we must provide a completed medical form to the daycare **prior** to first day of care.



The Bay Kids, LLC
 Childcare and Early Learning Center
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 Lusby, MD 20657
 Main: 410-231-2131

MSDE/OCC License Number 250638

- _____ **** I/we understand and agree to the Weekly Tuition Rates pricing provided by the Center. Prices are subject to change as required due to market conditions. We maintain the lowest prices to remain affordable, so our margins are very low. *Please discuss with Director, we can work with you!*
- _____ Until further direction, **A COVID memo which contains guidelines on health and safety protocols for our center will be included in your enrollment package.**
- _____ I/we understand and agree to the Tuition Schedule pricing provided by the Center, unless specific exceptions are arranged and noted herein, *Please discuss with Director, we can work with you!*
- _____ I/we understand there will be no adjusted tuition rates during school weeks if there is a snow day, late start, or early dismissal.
- _____ I/we understand daycare payment is due the Friday before the scheduled week of care. A late fee of \$35.00 per week will be assessed if payment is not received by COB on the Friday before the scheduled week of care. *Please discuss with Director, we can work with you!*
- _____ I/we have contracted for the hours indicated in above section. *I understand there will be an additional charge for excessive early or late arrivals and outside these times.*
- _____ I/we understand the early drop-off/late pick-up fee is \$10.00 per quarter hour, rounded to the closest quarter hour.
- _____ I/we understand the pick-up policy for other than parental pick up. (Authorized Guardian Pick up)
- _____ I/we agree to pay the last week's (last week of enrollment) tuition during the first week of enrollment.

THIS AGREEMENT AND THE PARENT HANDBOOK WHOLLY STATE THE OBLIGATIONS OF BOTH THE PARENT(S) AND THE BAY KIDS, LLC; THERE ARE NO OTHER IMPLIED OBLIGATIONS. ANY AMENDMENTS TO THIS AGREEMENT MUST BE IN WRITING AND SIGNED BY BOTH PARTIES.

The Bay Kids, LLC Part Time Contract January 2023.

SIGNATURE PAGE ORIGINAL - TO BE FILED IN FAMILY FOLDER
 COPY - TO CUSTOMER (PARENT)

Parent

(Please print) _____

Date of Signature _____

Signature _____

Parent of: _____

Primary Contact Method _____

Thank you,

 Shannon N. O'Steen, Director

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ORIGINAL



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END OF CONTRACT