



PEEK AND PLAY DAYCARE

G.Maple Leaf

Male', Ameenee Goalhi, 20350

Maldives

General Information

Starting Date:

Drop Off:

Pick up time:

Plan your childs visit

Daily visits ☐

Weekly ☐

If you have chosen weekly visits please tick on preferred days on a week

Sunday ☐

Monday ☐

Tuesday ☐

Wednesday ☐

Thursday ☐

Child's Name:

Date of Birth:

Sex: M ☐ F ☐

Address:

Bulding

Street

City

Country

Postal Code

Would you like to request any meal for your child during their visit? YES ☐

NO ☐

If YES, kindly tick from below;

Breakfast ☐

AM Snack ☐

Lunch ☐

PM Snack ☐

Breast Feed ☐

08:30am

10:30am

12:00pm

14:30pm

Pecify below

Do you wish to visit for breast feeding, If Yes please specify timings

If you wish to provide pumped milk please specify feeding timings

Is your child Allergic to any food? YES ☐

NO ☐

Please Specify:

The mealplan is attached for your reference

Parents Detail

Mothers Name:

Address:

Bulding

Street

City

Country

Postal Code

Telephone (Home):

Mobile:

Email:

Employment:

Department:

Work Contact:

Fathers Name:

Address:

Bulding Street City Country Postal Code
Telephone (Home): Mobile: Email:

Employment: Department: Work Contact:

Emergency contact and other than you who else has permission to pick your child

Name:

Address:

Bulding Street City Country Postal Code
Telephone (Home): Mobile: Email:

In case of an emergency, I give permission for any of the following individuals to be contacted and my child may be released to this contact

All about my Child

1. How would you describe your child's personality?
2. Favourite things/food/activities etc
3. Any particular fears and what comfort your child?
4. Does your child have regular nap time? I Nap time during the visit: Wakeup Time:
5. What is your child's disposition upon waking up? Happy/Sad/Energetic/Hungry/Others:
6. Does your child have any medical condition, behavioural disorder or special needs: If YES please explain

Daycare Service Contract between Childcare Provider and Parent

The following contract must be fully completed and signed before the service begin. This contract will explain the rules and regulations of Peek and play daycare facility, also outline the responsibilities of both the provider and the parents. Please read the policies mentioned on this contract thoroughly and If you require any further information or concerns regarding this contract, please discuss with us before its signed.

A. The following contact is between:

Providers Name: Peek and Play Daycare Centre, Fathimath Dheena Ahmed

Registration Number: 459-DC/2023/03

G. Maple Leaf, 4th Floor

Ameenee Goalhi, Male'

Email Address: admin@peeknplay.fun

Contact Number: +9609333900

AND

Mother / Legal Guardian Contact Number

Father / Legal Guardian Contact Number

CHILD IN CARE

Childs Name

Date of Birth

Care hours:*

Childs Important information:*

Contract starting date:

Ending date of this contract:

B. Bookings

Fully completed registration form with signature specifying your child's standard sessions and a bookings fee must be received to secure a spot at the day care with this registration form. The booking fee will be deducted from the first month's fee.

If parent/guardian wish to amend the child's standard booked sessions, please inform in advance to amend your child's booking via viber hotline number by writing. We will amend the child's booked session where we will try our best to accommodate any requests you make for additional sessions.

C. Opening Hours

We provide day care service from 08:00am to 16:30pm Sunday to Thursday for the age of 6 months to 10 years.

Our day care facility is closed on Friday, Saturday and all public holidays.

Parents are welcome at anytime to visit their child in our care.

D. Personal Belongings and attire

Child must be dressed in practical comfortable clothing.

As care provider we will make every reasonable effort to avoid loss or damage to your child's personal belongings however we will not be responsible for any loss or damage to such items.

E. Absence and holidays of Child or Care Provider

In case of any absence the parent/guardian must notify care provider by writing or via telephone, Viber to our Hotline at least one hour prior to scheduled care hour.

For absence; the total fee for the schedule hour will be charged accordingly as the slot and care givers time is already booked for the child.

Peeknplay daycare will be closed on Friday, Saturday and all public holidays. Other than this for any temporary closure the parents must be notified 15 days prior.

As every contracted child holds a spot at Peeknplay Daycare in event of child's absence due to vacation, the allocated spot will only be secured upon 80% of the payment.

F. Fees

Rate per hour	INFANT	TODDLER	PRE - SCHOOLER	Rate per hour	INFANT	TODDLER	PRE - SCHOOLER	ADD ON : MONTHLY MEAL PLAN TODDLER & PRESCHOOLER			
	additional 350/-	additional 250/-	No additional chargers		additional 350/-	additional 250/-	No additional chargers	Breakfast	mid morning snack	Lunch	mid afternoon snack
1	1950	1850	1600	5	5350	5250	5000	MVR 500	MVR 200	MVR 500	MVR 200
1.5	2750	2650	2400	5.5	5850	5750	5500				
2	3150	3050	2800	6	6110	6010	5760				
2.5	3850	3750	3500	6.5	6200	6100	5850	ADD ON : MEAL PLAN INFANTS			
3	3950	3850	3600	7	6370	6270	6020				
3.5	4200	4100	3850	7.5	6650	6550	6300				
4	4350	4250	4000	8	6750	6650	6400	Customize meal plan MVR 500 per month			
4.5	4850	4750	4500	8.5	6810	6710	6460				

G. Payment

Our fees are based on monthly basis and payment details will be notified in advance before signing this contract. Parent/guardian will receive an invoice at the end of each month for the up coming month. The child care provider must receive the payment before the 5th of every month and on this invoice we will be charging the child's standard sessions only.

Fees maybe paid by bank transfer and Cash. Once the payment is done the receipt must be forwarded via email or to our viber hotline number

It is the parent's responsibility to ensure that child is picked up by their contracted times and ultimately no later than 18:00hrs. If the parent is unable to pick up the child by the contracted time, alternate arrangements must be made. In the event that a parent cannot be contacted, it is our policy to call an emergency contact.

For additional hours MVR 85 will be charged and the charges must be cleared daily.

Failure to maintain the monthly daycare payment on time will result in an additional MVR 500 late fee charge and will require full payment of the complete balance within 14 days or child care service will be terminated

H. Meals

The care provider will provide Breakfast, AM Snack, Lunch & PM Snack for children who have requested, with an additional charge

I. Parent/Guardian must provide

1. Formula or Breast Milk 2. Spare Clothe 3. Underware 4. Daipers 5. Wipes 6. Cosmetic & Toiletries 7. Specifier

J. Dietary and Medical Requirements

Parent/guardian must complete the registration form detailing any dietary or medical requirement, any allergies, also update the care provider in writing of any changes to the information provided earlier.

K. Illness and Accidents

Parents/guardian must immediately inform the care provider if their child is suffering from any contagious illness and must not allow the child to attend daycare. In case of emergency the parent/guardian must notify the care provider of any medication that has been administered to the child within 24 hours.

If the child appear unwell or injured during the day, its care providers responsibility to contact the parent/guardian to collect the child.

We will not be responsible for your child contracting any contagious illness while at the day care.

L. Emergency Contact Details

Parent/guardian must immediately inform us of any changes to your authorised contact details.

In the event of life threatening emergency or disaster, the parent will be informed and the child will remain in daycare until parent/guardian or emergency contact arrives to fetch your child.

In case of any emergency, you give your permission to release your child to the individual mentioned as emergency contact other than Father/Mother.

M. Security

With this contract and registration child care provider must receive birth certificate of the child or National identity card along with Passport size photo.

Must provide a copy of parents/guardian and emergency contacts identity with this contract.

N. Publicity

From time to time we may photograph and video the children at Peeknplay Daycare. These images may be used for promotional purposes on social media or other platforms. If you do not wish for your child to be recorded or photographed please inform us in writing.

O. Complaints

If you have any concerns regarding the services we provide, please do not hesitate to discuss with the head of day care.

P. Termination

The parent/guardian may terminate the child for any reason by giving care provider at least one month notice. The fees remain payable during this period. If the parent/guardian withdraw the child within during notice period or fail to inform the care provider, the fees remain payable in full to notice.

As care provider we may terminate any child's place and not refund the balance of any fee paid, if one of the following conditions is met;

If the parent/guardian display inappropriate or disruptive behaviour towards our staff.

If the payments are not made on time.

If the child's needs are not met in our care.

If parent/guardian do not abide by the signed contract

Q. Signatures

By signing this contract, hereby all parties acknowledge that you have entered into a legally binding contract to agree and respect all of the above terms, policies and conditions, including the financial responsibilities mentioned on this contract.

The care provider is responsible for providing all signers a copy of this signed contract.

Care Providers Signature	NIC No:	Date
Mother / Legal Guardian	NIC No:	Date
Father / Legal Guardian	NIC No:	Date