**Parent Schedule/Hours Contract**

**Child’s name:** **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Starting date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Drop off/Pick up\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Drop off/pick up times must remain within these hours so we can meet staff/child ratios**.

**We require a $50 non-refundable registration fee.**

**Please circle the following that you requested:**

3+ days a week Full-time

2 days a week Monday Tuesday Wednesday Thursday Friday (Part-Time)

-Part-time cannot be guaranteed if a full-time spot is needed, but will be accommodated to the best of our ability

**Child Care Rates: (Full-time 100+hrs a month) (Part-time 50-99 hrs. a month)**

|  |  |  |  |
| --- | --- | --- | --- |
| 10-19 months | 20 months-3years | 3- Kindergarten | Kindergarten |
| Full-time $1431.95 | Full-time $ 1132.14 | Full-time $1100.01 | Full-time $1098.00 |
| Affordable grant $1105.70 | Affordable grant $805.89 | Affordable grant $773.76 | Affordable grant $771.75 |
| Full-time-$326.25    Part-time $930.77  Affordable grant $700.77  Part-time-$230 | Full-Time-$326.25    Part-time $735.89  Affordable grant $505.89  Part-time-$230 | Full-time-$326.25  Part-time $715.01  Affordable grant $485.01  Part-time-$230 | Full-time $326.25  Part-time$713.70  Affordable grant $483.70  Part-time $230 |

**(Effective April 2025)**

\*The affordable grant amount will come off the parent portion each month.

\*One month written notice is required for cancellation of childcare.

\*Full Fees are due regardless of child’s illness, statutory holidays, emergency closure, PD and holiday days off, ect. **no refund**

\* If it hasn’t been arranged for your child to be dropped off later than 9:30 am, your spot will no longer be available

\*Late pick-up fee will be $5 for every minute after 5:30 pm

\*Payments are due **before** 7 am on the first of each month. If payment is late, there will be a $25 late charge added to your next month's invoice

**Parent(s) name** (PRINT): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Parent signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date:**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_