

CHILD CARE AGREEMENT

Child's name:		First	Middle	Last			
Parent or Guardian name:		First	Middle	Last			
Days and times my child will receive care:							
Check days of care	<input type="checkbox"/> Sunday	<input type="checkbox"/> Monday	<input type="checkbox"/> Tuesday	<input type="checkbox"/> Wednesday	<input type="checkbox"/> Thursday	<input type="checkbox"/> Friday	<input type="checkbox"/> Saturday
Arrival time							
Departure time							
FEE: \$ _____ per:		<input type="checkbox"/> Hour <input type="checkbox"/> Day <input type="checkbox"/> Week <input type="checkbox"/> Month		Date payment due: Source of payment: <input type="checkbox"/> Parent <input type="checkbox"/> Other (specify):			
Overtime rate: \$ <u>1/2 Ft Rate</u> per: <u>Day</u>			Late fee: \$ <u>\$25</u> per: <u>Day</u>				
<p>I agree to promptly notify the child care provider of any changes to the above information. I understand that I am fully responsible for the terms of this agreement as stipulated.</p> <p>I have read, understand, and agree to comply with the policy and procedures and information for parents given to me by: <u>Phanta Tofa - Auntv's Place Early Learning & Child Care Center, LLC</u> <small>Name of Licensee</small></p>							
Parent or guardian signature		Date		Parent or guardian signature		Date	
<p>I agree to provide child care services according to the above plan. I agree to promptly notify the parents or guardians of any changes to above information.</p>							
Licensee signature			Date				
Street Address		City		State		Zip code	
<u>5111 S 291st St</u>		<u>Auburn</u>		<u>WA</u>		<u>98001</u>	
Comments <u>\$75 Nonrefundable Registration Fee + 2 weeks tuition Deposit</u>							