

Parent/Child Care Agreement

(initial each section and sign below)

_____ Open Arms Early Childhood Learning Center agrees to provide childcare and developmentally appropriate curriculum for all children enrolled.

_____ \$100/\$150 **nonrefundable** enrollment fee must be paid at the time of enrollment to guarantee the child's placement in advance of care. Annual registration fees will be assessed each school year.

_____ The tuition rate for the service is due on the Monday of the week of service. A \$30.00, late payment fee will be assessed to all accounts not paid by Tuesday of the week of service. If tuition is not paid for two (2) consecutive weeks, my child will be unable to return to Open Arms until account is paid in full. I understand my child could possibly be terminated for consistent late payments.

_____ Open Arms requires **two (2) weeks written notice** if I decide to remove my child from care. The full tuition is due during those two weeks.

_____ I understand that my child will not be allowed to attend school if my tuition becomes delinquent.

_____ All NSF payments will incur a \$30.00 fee per returned item, if it becomes a reoccurring problem, I will be required to pay with money order with a \$5.00 administration fee.

_____ If legal action is necessary to collect any of the above tuition, I will pay all court costs, legal fees, and/or collection fees.

_____ Medication is administered only with a medication administration authorization form including the date, name of child, name of medication, and dosage. Medications are kept in the office. Prescription labels must be attached. I understand if medication is to be given three times a day, Open Arms will only give the middle dose and if it is to be given twice a day, Open Arms will not administer.

_____ My child will not be permitted to enter or leave the Center without being escorted by an authorized person. The teacher will be notified daily upon the arrival and dismissal of my child.

_____ I understand it is my responsibility to sign my child in at drop off time and sign my child out at pick up time by using the Open Arms app.

_____ I understand I must call the childcare center if my child is absent (within 1 hour of normal drop off time) or the center will be calling to find out why child is not attending.

_____ I acknowledge that it is my responsibility to keep my child's record current to reflect any significant changes as they occur...telephone numbers, work location, emergency contacts, child's physician, child's health status, infant feeding plans and immunization records and I give consent for child care personnel to have access to child's records.

_____ The Center agrees to keep me informed of any incidents, injuries, and illnesses and adverse reactions to medications that may occur to my child.

_____ Open Arms agrees to obtain written permission from me before my child can participate in routine transportation, field trips, photographs, and special activities that take place away from the Center.

_____ In the event of an emergency that involves my child, if Open Arms is unable to contact me I hereby authorize any medical care.

_____ I understand if my child has a 100.4 fever or higher, is vomiting, has diarrhea or any other signs of illness, they must be kept home.

_____ I understand if my child gets sent home with any of the above symptoms, they must stay home the next day and free of all symptoms without medication for 24 hours.

_____ I understand repeated misbehavior will result in a conference between the Director and the parent(s) and may result in disenrollment. (Please see section under "**Behavior Management**")

_____ I have received a copy, read and agree to abide by the policies and procedures as outlined in the Open Arms Parent Handbook.

School Readiness Children Only

_____ I understand Open Arms charges an additional discretionary fee on top of the School Readiness Rate that can be up to the difference of our full time tuition rate.

_____ I understand only 3 unexcused absences and 3 excused absences with a doctor's note per month are allowed before Open Arms can charge the parent the full time daily rate.

_____ I understand that parents and/or guardians must sign in and out manually on the sign in/out attendance forms daily with full signature and the time of drop off and time of pick up. If this is done in advance or not done at all Open Arms has the right to charge the full day tuition for each missing/incorrect signature and time.

_____ I understand that it is my responsibility to maintain the records and to keep the appointments made with the Early Learning Coalition for contract renewal.

I have received a copy, read and agree to abide by the policies and procedures as outlined in the Open Arms Parent Handbook.

Parent/Guardian signature

Date

Director signature

Date