KIDS HAVEN, by Sandy Child Care Contract

Section 1 – Personal Information

STUDENT INFORMATION:

Name of Child			
	First	Middle Initial	Last
Address		7: 0 1	
Street	City/State		tion Even Data
Phone	Date of Birth	111111111122	ation Exp. Date
Other children (nam	e & age) living in you	ır home	
PARENT INFORM	MATION:		
Mother's Name		Address	
		<u></u>	(If different from above)
Employer		Work Phone	
Father's Name			
			f different from above)
Employer		Work Phone	
If parents are divorc	ed or separated, pleas	e list custodial pare	nt:
Special Court Order	on File		
-			

MEDICAL RELEASE:

***In case of a medical emergency, I hereby authorize KIDS HAVEN, by Sandy permission to obtain emergency medical treatment necessary by a physician and/or a hospital. Your child will be transported to Baptist Health LaGrange, 1025 New Moody Ln, LaGrange 40031 unless you indicate otherwise.

Signature of Parent/Guardian (Circle One)			Date
Alternative Hospital	Address	Parent/Guardian Signature (Circle One)	Date
Child's Doctor		Phone	
Any special medical alerts?		_If so, please list:	

**If parents cannot be reached at home or work in case of an emergency or illness, who can we call?

Name_____Phone_____Relationship_____

PICK UP AND DROP OFF AUTHORIZATION:

List three (3) people authorized by you to pick up or drop off your child other than parents listed above:

Name	Phone	Relationship
Name	Phone	Relationship
Name	Phone	Relationship

MEDIA, TRANSPORTATION & LEGAL AUTHORIZATION:

I hereby grant permission for my child to participate in all KIDS HAVEN, by Sandy activities including field trips requiring transportation to and from school by a contracted bus company. I also grant KIDS HAVEN, by Sandy permission to use any photographs of my child for display at school or on their website. I hereby warrant to KIDS HAVEN, by Sandy that I have legal custody of my child and am authorized to place my child in your care and custody, and am further authorized to sign this child care contract. I have read and understand the above conditions and have completed my child's contract with valid and true information. I understand that I cannot hold KIDS HAVEN, by Sandy responsible for my child's safety if false or incorrect information is given about my child. I agree to notify KIDS HAVEN, by Sandy immediately when any of the above information changes.

Date

Parent/ Guardian Signature (Circle One)

ANIMALS:

At KIDS HAVEN, by Sandy we believe that children can benefit from playing with animals, which can be both a source of calmness and relaxation, as well as a source of stimulation for the brain and body. Playing with an animal can even be a doorway to learning for a child. It can stimulate a child's imagination and curiosity. All animals on the premises of KIDS HAVEN, by Sandy will always be supervised and in the control of an adult. Animals will be given rabies shots if it is applicable to that type of pet (ie: dogs or cats). We do allow outside entities to visit with animals on occasion. Please sign below to give your written consent for animals to be present in your child's classroom or on the premises of KIDS HAVEN, by Sandy.

Parent/Guardian Signature (Circle One)

Date

Section 2 – Financial Agreement

I will pay the sum of \$as a tuition f	fee to enroll		
· ·	(Name of child	to be enrolled)	
for the following child care services:		_From	To
C C	(Classroom)	(Hours o	f Care Needed)
Check one of the following payment option	IS:		
Weekly, due on Monday	Monthly, due on 1	15 th day of	month
Bi-Weekly, due Monday in advance	Other (4C, Purchase of Day Care, etc.)		

PAYMENT OF FEES:

All fees are due on Monday of the week your child attends school. Your fees become delinquent after check out time on Wednesday. A late fee of \$15.00 will be added to your account after check out time on Wednesday. If tuition fees become two (2) weeks delinquent, you will be asked to remove your child from the center until your fees have been paid in full. Your child will be readmitted only when these delinquent fees are paid in full.

METHOD OF PAYMENT:

Fees may be paid by check, cash (only exact amounts), ACH (direct withdrawal) or by credit card or debit card (Master Card/Visa/Discover). When paying by check, please put your child's name on the bottom of the check.

REGISTRATION FEE:

A registration fee of \$75.00 per child is due on the first day of enrollment and is also required on January 1st of each subsequent year if I choose to continue to keep my child enrolled at KIDS HAVEN, by Sandy. The registration fee is used for educational supplies and processing costs and is **nonrefundable**.

LATE PICK UP CHARGES:

I understand that if my child remains at KIDS HAVEN, by Sandy past the scheduled closing time of 6:00 p.m., I will be charged the following fee per child:

6:01 – 6:15 \$20.00 After 6:15 \$1.00 per minute

(This charge is automatically posted to your child's account the day after late pick up occurs.)

WITHDRAWALS:

If I choose to withdraw my child, for any reason, from KIDS HAVEN, by Sandy, I will give at least one (1) week notice to the Director or Assistant Director. I further understand that if my child is absent (for no apparent or known reason) for two (2) weeks and the appropriate fees have not been paid, my child will be automatically withdrawn from KIDS HAVEN, by Sandy. I will be required to pay another registration fee prior to readmission to KIDS HAVEN, by Sandy.

RETURN CHECK POLICY:

A fee of \$30.00 will be charged to your account for any returned checks.

VACATIONS AND HOLIDAYS:

KIDS HAVEN, by Sandy will allow one (1) week vacation (5 consecutive days) with a tuition credit of 100% of your normal tuition fees. I further understand that no credit is given for the six major holidays: New Year's Day, Memorial Day, July 4th, Labor Day, Thanksgiving Day, the day after Thanksgiving, Christmas Eve and Christmas Day. If any of these holidays fall on a Sunday or week day, we reserve the right to close the following day. These are the only days KIDS HAVEN, by Sandy will be closed unless otherwise notified.

I have read and agree to the financial terms as set forth in the above paragraphs.

Parent/Guardian Signature (Circle One)

Date

Section 3 – Parent Questionnaire

Please complete this survey and return it along with Section 1 and 2 of the Child Care Contract. This information will help us become better acquainted with your child. Feel free to use additional paper as necessary. We would like to thank you in advance for providing this useful information to us.

- 1. By what name do you call your child?
- 2. Does your child have any disabilities including allergies? If so, please explain
- 3. What terminology does your child use regarding the use of the bathroom?
- 4. If your child has attended preschool before, was the experience enjoyable?
- 5. Does your child have tantrums?
- 6. Does your child suck his/her thumb?
- 7. If your child has unusual fears, what are they?
- 8. Does your child use the following at home: crayons scissors pencil chalk markers (please circle any used)
- 9. What foods does your child like?
- 10. What foods does your child dislike?
- 11. What do you see as your child's strengths?
- 12. Is there any task in which you anticipate difficulty for your child? (e.g. sharing, following directions, etc.)
- 13. What goals do you have for your child?
- 14. What other information would you like us to know about your child?

Child's Name	Date		
Parent/Guardian Signature			

Section 4 – Medical Background

Does your child now have or have had any of the following medical conditions?

_____Allergies (please list)

_____Surgeries (date and type)

_____Chronic Ear Infections (dates)

_____Asthma (when diagnosed by a doctor)

____Frequent Colds

Has your child had any of the following childhood illnesses?

____Chicken Pox (date)

____Measles (date)

____Mumps (date)

_____Rubella (date)

____Meningitis (date)

_____RSV (date)

How was your pregnancy with your child?_____

***If your child has had any of the childhood illnesses listed above, please get a doctor's signature beside the illness.

Child's Name_____

Parent/Guardian Name (Printed)_____

Parent/Guardian Signature_____

Child Care Policies

Business policies for KIDS HAVEN, by Sandy are listed and explained in the center's handbook. (copy included). This handbook is given to each parent upon enrollment of their child. In addition to the handbook, each classroom teacher distributes a form listing items the parent must provide on their child's first day of attendance. Parents or guardians are required to fill out a Child Care Contract which includes the following sections: Section 1 – Personal Information, Section 2 – Financial Agreement, Section 3 – Parent Questionnaire, and Section 4 – Medical Background. Registration fees and first week's tuition fee must also be paid before enrollment is accepted. A copy of their child's immunization certificate must be submitted within two weeks of enrollment as required by the state of Kentucky.

Security

A keypad entry is the only method of entering or exiting our center. Parents are assigned a code upon enrollment and are instructed on how to enter and exit with their assigned code. Our office is located at the entrance of the building and is staffed with a person from 6:30 a.m. to 6:00 p.m. to provide added security. The building has a central hook up system to the fire department for emergency purposes in case of a fire.

Accounting Practices

KIDS HAVEN, by Sandy uses QuickBooks Pro 2016 to record enrollment of all children and to record each family's financial information. Each month a Profit and Loss and Balance Sheet statement is sent to their CPA for review. Weekly statements are handed out to parents on Thursday if they have not paid their tuition by Wednesday. If an account becomes two weeks delinquent, the parent is asked to withdraw their child until the account is current. If an account becomes seriously past due, we submit the account to Credit Clearing House for collection and dismiss the child.

KIDS HAVEN, *by Sandy* A Child Development Center

1010 Oldham Oaks Road LaGrange, KY 40031 (502)222-5008

ENROLLMENT PACKAGE

All items below must be completed in full and returned to the Director for acceptance of your child's enrollment as a student at KIDS HAVEN, *by Sandy*

CHECKLIST:

____Child Care Contract

<u>Current Immunization Certificate</u>

_____Registration Fee

____First Week's Tuition