SCHOOL READINESS FAMILY DAY CARE CONTRACT

8820 Lilienthal Ave Los Angeles, CA 90045
(310) 695-6277
www.readinessdaycare.com

CHILD CARE CONTRACT

This is a contract between _____

and Mariza Mendoza, owner of SCHOOL READINESS FAMILY DAYCARE.

(herein called "Guardian /Parent of (Child's name) _____ agree to comply with the following rules and regulations of SCHOOL READINESS FAMILY DAY CARE.
IT is to be understood that each child is to be treated equally, as I that child was the licensed day care provider's own.
Childcare services will be provided by the provider for the following children.

1- _____Born on: _____

2_ _____Born on: _____

_____

PARENTS/ GUARDIANS CONTACT INFORMATION:

1-NAME/ LAST NAME: _____

2- NAME/LAST NAME: _____

Address_____

Address_____

Home Phone_____

Mom's cell ( )_____

Dad's cell ( )_____

Other Phone ( )_____

GENERAL AGREEMENTS:

1. Days of Service are:

MON. TUES. WED. THURS. FRIDAY.

(circle days needed)

HOURS:

FROM: _____a.m./p.m. To: _____a.m./p.m.

FROM: _____a.m./p.m. To: _____a.m./p.m.

2.The above mention child/children will be placed and removed according to the following schedule:

HOURS:

Daycare hours are 7:30 am to 5:30Pm, Monday through Friday, except Federal and State holidays. There will be no pick-Up or drop-off between 1:00 trough 3:pm, unless emergency, because of nap time. Children may be picked up after 3:00pm. Please notify me for any pick-ups earlier than 3:00pm (I.e. doctor appointments, special occasions, etc.) If your child will not be in due to illness or others various reasons, please notify daycare provider Extended care hours are on an hour-by-hour basis pre-arranged between Parent and Provider.

LATE PICK-UP FEE: An amount of $10.00 will be charge every 15 minutes of being late. Payment is due upon arrival that same day.

FEES: Fees will be paid weekly on Monday, in advance for that week. Fees for part-time care are due on the first day of the week for which care is provided. Fees will be paid for the contracted days regardless of attendance, including holidays and child's sick days. Since it would be unfair to you for me to accept another child in place of your own while you were on vacation, it shall be your obligation to continue payment in order to insure the continuance of your child's care with provider. Fees for the first week are due upon signing this contract.

Full day: 8 hours
Half day: 5 hours (only available if attending all week)
Extended day 7:30- to 5:30 = 10 hours

TUTION FEES: Fees for the first week are due upon signing this contract.

HOLIDAYS, TIME OFF, SICK DAYS AND VACATIONS

There is no charge for any time taken off by the day care provider. The day care provider will make every attempt to provide substitute care. However, parents should be prepared with their own backup.

The Daycare takes two weeks of vacation each year and will give the family at least one month written notice of our vacation plans. The Daycare staff, may have up to one weeks of vacation time for which you don't have to pay. This vacation may be broken and taken at any time, as long you receive one month written notice.

CHILD ILLNESS POLICY: Provider reserves the right not to provide care for a child who is seriously ill or contagious (I.e. a child who the provider feels would jeopardize the health of the other children being cared for). Provider will not accept a child with any of the following conditions:
Severe Cold-with temperature, sneezing and nose drainage

Diarrhea

Vomiting
Rashes-which you cannot identify or that has not been diagnosed by a physician. If your child is sent home due to illness, this will be considered an absence.
ABSENCE POLICY: Full fee will be charged for all absences.

RETURNED CHECK POLICY: There will be a $30.00 charge on any returned checks payable to Mariza Mendoza.

WITHDRAWAL OF CHILD BY PARENT: This contract may be terminated by the parent upon one month written notice. If the child is withdrawn without notice, parent agrees to pay provider four times the amount listed under **TOTAL WEEKLY FEE.**

The Day Care provider is closed during the following holidays:

New Year's Day, Martin Luther King, Jr , President's Day, Memorial Day, Independence Day, Labor Day, Veterans Day, Thanksgiving Day, and the day after, and Christmas Day and the day after.

MEALS
The following meal are served each day at no additional charge:

Breakfast, Morning Snack, Lunch and Afternoon Snack.

I am a participant in a Child Nutrition Program and make every attempt to provide enjoyable and nutritious meals for your child. I offer a variety of foods. Your child is encouraged to try new foods **but will not be forced to do so.**

SICK CARE

Any medication to be given to the child must be provided in a clearly labeled prescription bottle with dosage information. Non-prescription medication, if needed, will also be administered, if provided by the parent. Parent will need to sign a request form.

All children in this facility are required to have all immunizations appropriate for their age.

PARENT RESPONSIBILITIES

1. Toothbrush/toothpaste
2. A complete change of clothes, appropriate for the weather
3. Diapers and supplies.
4. Milk if you wish

CHILD ABUSE

We are required by law to report any suspected sign of neglect or abuse of the children in our care, and will promptly do so. We are liable as day care professionals for this responsibility and can be fined and/or jailed for failure to do so.

MEDICAL EMERGENCIES

Note that your child will only be released to persons other than the parent or legal guardian if the name of these person appears on your signed Emergency Form. In case of an emergency, a phone call will suffice as long as the person picking up the child shows identification.

TRANSPORTATION AGREEMENT

You are responsible for transporting your child to and from the day care facility.

Occasionally we may need to take your child to activities like field trips. We will provide transportation. Each child will be required to have a car seat, provided by the parents. We do ask for your permission to travel in a car.

THE PARENT (S) give permission for the below named child/children to travel in vehicle with

day care provider or with authorized individuals.

I _____gives their permission for

_____ _____

To travel in the day care provider vehicle.

CONTRACT CHANGES AND RENEWAL

Two weeks' notice will be given by provider prior to any significant changes in this contract. This contractual agreement will be reviewed at the beginning of each year.

Parent (Guardian) Signature

_____

Date_____

Day Care Provider Signature

_____

Date_____

CHILD'S INFORMATION AT A GLANCE

NAME:

_____

NICKNAME:

_____

ALLERGIES:

_____

FOOD CHOICES:

_____

FAVORITE GAME:

_____

SLEEPING PATTERN:

_____

MOOD PATTERN:

_____

VACCINATIONS:

_____

OTHERS INFORMATION:

_____