

HalfPints Preschool and Daycare Center Contract and Rate Agreement

I, _____, shall at this time enter into an agreement with Robin DeRaps and April Cummings, of HalfPints Preschool and Daycare center, for the care of my child(ren), _____.

A rate of \$ _____ per week will be charged. These rates will be charged regardless of the child's attendance. Contracted hours are no more than 45 hours per week. Any extended time over 45 hours will be \$15.00 per child a day to be paid the following week. Bounced Check - There will be a fee of \$25.00

The contracted days and hours are as follows:

Monday _____ to _____

Tuesday _____ to _____

Wednesday _____ to _____

Thursday _____ to _____

Friday _____ to _____

Payment is due prior to week of care. If payment is not received by the first day of care the following week, your child will not be able to attend until payment is made.

Option of paying (circle): Weekly Bi-weekly Monthly

Daycare hours of operation are Monday - Friday, from 6:30 am to 5:30 pm.

Day care holidays will include the following days: Schedule to be sent, payment required.

A non-refundable registration fee/deposit of \$30.00 is required.

By signing this contract, Parent agrees that they received the HalfPints Handbook and that they agree to abide by the written policies contained therein.

Provider Signature: _____

Date: _____

Parent Signature: _____

Date: _____