



Alexandra Marinuk 41 Elmview St. Welland, ON. info@littlemunckinsdaycre.ca

905.414.3589

Child Care Services Contract

PARTIES:									
This Child Care Contract made (date) is between:									
Provider(s):an									
Parent(s)/Guardian(s):									
FOR THE CA	ARE OF:								
Child Name: DOB									
Child Name: DOB									
Child Name: DOB									
Child Name: DOB									
Provider may amend the contract by giving the Parent/Guardian a copy of the new or changed policies at least weeks before any changes go into effect. HOURS OF CARE NEEDED:									
	SUN	MON	TUES	WED	THURS	FRI	SAT		
DROP OFF									
PICK UP									
PAYMENT F	OR CARE I	PROVIDED:							
PAYMENT FOR CARE PROVIDED: 1st Child \$per month/week/day/hour									
2nd Child\$ per month/week/day/hour									
3rd Child \$ per month/week/day/hour									
4th Child \$ per month/week/day/hour									
PAYMENTS	/FEES:								
Payments are due the Monday before care. Payment may be made by {enter payment									
	methods here}. A late fee of \$ per day will be assessed for each late day. If								
	payment is more than one week late, this agreement will be terminated.								

Pare	t/Guardian will be charged additional fees for early drop off/late pick up (unle	285
agre	d upon in advance).	
\$	per minute increment	
\$	per 5 minute increments	
\$	per 30 minute increments	

HOLIDAY CLOSURES:

Little Munchkins Daycare will be closed on all statutory holidays.

During holiday closures, the Provider will not provide care and Parent/Guardian will not be billed.

CLOSURES DUE TO OTHER REASONS:

For day care closures due to other reasons (e.g. power outage, weather, acts of God, etc.), Parent/Guardian is not expected to pay for care on these days.

VACATIONS:

Provider will take 2 weeks of vacation time during the year. Provider will give Parent/Guardian minimum of 6 weeks notice of this vacation. Parent/Guardian is not expected to pay for care on those days.

If a Parent/Guardian plans on taking a vacation and the child will not be in care, the Provider should be given 4 weeks notice. Parent is not expected to pay during their scheduled vacations.

ILLNESS/INJURIES:

When the Provider is ill and unable to provide care, he/she will make every effort to provide as much notice as possible. Parent/Guardian is not expected to pay on provider sick days.

When a child is ill and will stay home, the Parent/Guardian is expected to make every effort to give the Provider as much notice as possible. Parent/Guardian is not expected to pay on child sick days.

If a child does not arrive for the day and no notice has been given to the Provider, Parent/Guardian is still expected to pay for that day of care.

When a child becomes ill while in the care of the Provider, the Provider will immediately notify the Parent/Guardian. If child presents with a fever above 38C, vomiting, or diarrhea, the Parent/Guardian or approved pick up person, will be required to come pick up the child from day care.

In the event of injury, Parent/Guardian will be notified immediately. If it is a life threatening injury, emergency authorities will be contacted.

TRIAL PERIOD:

All children will be accepted on a 2 week trial period to ensure that the child is a good fit for our daycare. During this 2 week trial period, the Provider or Parent/Guardian can terminate this agreement with 1 day written notice if it believed that the child is not a good fit for our daycare. After the 2 week trial period, care can be terminated by either the Provider or Parent/Guardian by providing a 2 week written notice and a reason.

AGREEMENT SIGNATURES

IN WITNESS WHEREOF, the Parties hereto agree to the above terms and have caused this Agreement to be executed in their names.

Provider Name	
Provider Signature	
Date:	
Parent/Guardian Name	
Parent/Guardian Signature	
Date:	
Parent/Guardian Name	
Parent/Guardian Signature	
Date:	