



Hand in Hand: A Place for All Children Contract

Child's
Name: _____

Date of Birth: _____

- Set Schedule
 Variable Schedule*
 Drop In**
 Drop Enrollment***

Effective Date: _____

Rate: _____

Arrival Times									
Monday	:	Tuesday	:	Wednesday	:	Thursday	:	Friday	:
Departure Times									
Monday	:	Tuesday	:	Wednesday	:	Thursday	:	Friday	:

My child will be here for the following meals:

- Breakfast
 A.M. Snack
 Lunch
 P.M. Snack
 Super Snack

My child is enrolled in the following EC4T class time AM (8:30 – 12:00)

*I agree to provide Hand In Hand with a weekly schedule, by **Wednesday**, prior to the week care is needed. If a schedule is not received by Wednesday we will assume care is not needed.

**Drop In is billed hourly and subject to availability

COUNTY AUTHORIZATION must be received within two weeks after your start date. If no authorization is received you will be responsible for all past, present and future billings.

I hereby agree to comply with the rules and regulations of Hand In Hand regarding fees, payment agreement, attendance, health, parking, clothing and other items specified in the parent handbook.

I agree to provide the program with all forms and other written information that has been or will be requested.

I hereby agree to notify the program in writing, by 6:00pm on **Wednesday**, any change in schedule or withdrawal. I understand that any overdue unpaid balances may be remanded to a collection agency and that I am responsible for any charges incurred in collection proceedings.

I understand that I will be notified of the holidays in which Hand In Hand is closed, at the beginning of each year or upon enrollment.

I understand that a copy of HSS46 (licensing rules for group child care centers), our current license and any license violations are posted at the front desk next to the parents' computer.

My signature below indicates that I have read the terms of this agreement and the parent handbook provided upon enrollment. It further indicates that I have had the opportunity to ask and have my questions satisfactorily answered.

Parent/Guardian Signature: _____ Date: _____

Program Coordinator: _____ Date: _____