

This is an agreement between _____, parent(s), and **Safia's Day Care Academy, LLC (SDCA)**, family day care provider, regarding the care of the following child:

Child's Name	Date of Birth

Monday	AM	AM	Friday	AM	AM
	PM	PM		PM	PM
Tuesday	AM	AM	Comment:		
	PM	PM			
Wednesday	AM	AM			
	PM	PM			
Thursday	AM	AM			
	PM	PM			

Pick Up:

You agree to pick up your child on time. The late fee is **\$10.00 per hour** when notified. If SDCA has not been notified, the late fee is **\$10.00** plus an additional fee of **\$1.00 per minute**. In the event of an emergency, you agree to notify **SDCA** as soon as possible and let **SDCA** know what time you will arrive.

You will sign an Emergency Medical Care form prior to your child's first day of care indicating any individuals who are authorized to pick up your child. You will agree to notify **SDCA** prior to any day one of these individuals (other than yourself) will pick up the child.

Fees:

The fee for care will be:

School Age \$	Infant/Toddler/Preschool/School \$	Before/After-School \$
Daily/Weekly/Drop-In	Age - Weekly	Weekly

This fee includes: Breakfast, Morning Snack, Lunch, Evening Snack and Supper

But not diapers, wipes, or diaper rash ointments.

You agree to pay this fee in full on Monday; which will be for care for the current week.

Personal/Vacation Time:

SDCA will be paid for the following holidays: **New Year's Day, Martin Luther King's Day, Memorial Day, Independence Day -July 4th, Labor Day, Thanksgiving, and Christmas Day.**

SDCA will not provide care on the following personal or religious days: **Eid Al-Fitr (1 day) and Eid Al-Adha (3 days) Lunar days;** you will not be charged for these days.

Initials _____

SDCA understand that you will observe the following personal or religious days _____,
_____, _____, _____, _____,
you will not be charged for these days. (Not available for Drop-Ins).

You will not be charged for two weeks of vacation time per year provided you let SDCA know at least two weeks in advance. SDCA will take two weeks of vacation per year; SDCA will let you know at least one month in advance and you will not be charged for this time. (Not available for Drop-Ins)

Sick Time:

In the interest of all the children, it is best to keep a sick child at home if they have any of the following conditions: a contagious disease, a fever exceeding 100.4 degrees F, more than one undiagnosed episode of diarrhea or vomiting, or an undiagnosed skin rash, or any other illness that requires an excessive amount of individual adult attention,. No child will be accepted for sick child care on a drop-in basis. As a parent, you know best when it is more appropriate for your child to be comforted by you at home than being sent to a day care home.

When your child is sick, you should notify SDCA by **6:00AM** in the morning, or the night before if possible. SDCA will not be paid for the day when the provider SDCA or the provider's child is sick.

In the event of a prolonged illness of either your child or the provider SDCA or the provider's child, we will discuss other permanent arrangements that are in all of our best interests. You may find it difficult to continue to pay to keep your child's slot open while he/she is sick. SDCA realize it may be difficult for you to continue with temporary care while the provider SDCA or the provider's child is suffering such a prolonged illness. No permanent arrangements will be made until such time that the situation becomes prolonged or indefinite, and we have discussed the situation.

When your child becomes ill at SDCA, you will be notified as soon as possible to discuss an early or immediate pick up. Your child must be picked up within an hour whenever possible, unless a mutually agreed upon time is set. You agree to accept and trust SDCA judgment of how sick your child has become while in SDCA care.

If your child is seen by a doctor for an illness, he/she must return with a note from that doctor indicating the type of illness, expected term of illness, medication child is on, and if illness is contagious. If your child begins taking an antibiotic, he /she must stay home for at least 36 hours after the medication has been started.

As part of this contract, you agree to sign a medical information and permission form for your child and these forms will be kept accessible to you.

Other:

You are responsible for selecting a back up provider(s) to care for your child when SDCA is unavailable. SDCA will be happy to provide you with the names of registered providers in the area.

Initials _____

By signing this contract you also agree to the terms and conditions stated in the **SDCA Parent Handbook of Policies and Procedures** (<http://www.sdcaacademy.com/Policies&Procedures.php>).

SDCA agree to offer an atmosphere of warmth caring and concern for all the children in SDCA care. SDCA will offer nutritious snacks, meals and beverages for every child. SDCA will take responsibility for strollers, clothing or other items belonging to the child.

You will agree to provide SDCA with all necessary forms and telephone numbers where you or a responsible relative can be reached at all times before the first day your child is in SDCA care.

You will give permission for your child to ride in SDCA vehicle; SDCA agree to use an approved infant car seat, booster seat or seat belt as appropriate. SDCA will make every effort to plan trips in advance and to notify you of such trips. You will agree to let SDCA transport your child without notice in an emergency situation (ie. Provider's child becomes sick at school and needs immediate pick up). SDCA will inform you if such a situation has occurred.

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Termination Procedures:

This contract may be terminated by the parent(s) or the provider. A **two-week** notice prior to the last date of care is required.
The provider may immediately terminate this contract without any notice if payment is not made on time.

Other:

- *If the provider chooses not to enforce any portion of the contract, it does not give up the provider's right to enforce any other portion of the contract.*
- *The contract can be revised at any time by the provider if necessary.*

Signatures:

The signatures below indicate agreement with this contract and with the written policies of the provider, SDCA, (contained in a separate document). SDCA updates the policy online at <http://www.sdcaacademy.com/Policies&Procedures.php>. It is the Parent's responsibility to keep informed.

Parent's name	Parent's signature	Date
Parent's name	Parent's signature	Date
Provider's name	Provider's signature	Date

If the parent or legal guardian is under the age of 18, a co-signer must sign this agreement and act as guarantor to the contract and agree to be bound by all financial terms.

Initials _____