

Sun, Stars & Moon Daycare
 510 Curtis Street, Watertown, NY 13601
 Phone # 315-778-8630

www.sunstarsmoondaycare.com

Agreement Contract & Policy 2011 & 2012

The following is an agreement between _____ (Parent's name) and Sun, Stars & Moon Daycare for childcare to be provided for

1st child's name _____ Child's age _____ DOB _____

2nd Child's name _____ Child's age _____ DOB _____

Address _____

Home Phone Number _____

Mother's Work Number _____ cell _____

Father's Work Number _____ cell _____

EMAIL ADDRESS: _____

Childcare will be provided: If schedule hours vary they are due on Fridays before 4:00pm please. If holiday falls on Friday payment and schedules due Thursday before 4pm before following week

Days	Time in	Time out
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		

Total number of hours per week _____ (rate) _____ hourly, or _____ daily extra 1st child
 The cost of care will be \$ _____ weekly or _____ Bi-wkly _____ daily _____ hourly
 Payments will be made _____ weekly or _____ Bi-weekly _____ early pay discount on full time.

Total number of hours per week _____ (rate) _____ hourly, or _____ daily extra 2nd child
 The cost of care will be \$ _____ weekly or _____ BI-weekly
 Payments will be made _____ weekly or _____ Bi-weekly _____ 2nd child DISC only when payment made on time regularly.

★ One week deposit fee \$ _____ plus the first week of tuition is due on the Friday before 4:00pm and or before the first day of attendance during the first week of care when starting.

- ★ \$125.00 to (hold only) a slot weekly before a child starts.
- ★ Deposit is used to pay for bills owed to daycare. any refunds. No reimbursements until after last payment received from dss to see what they covered.
- ★ A discount on the oldest child only (1) if twins and both must be full time and pay bills on time to receive, this is for cash only no subsidies.
- ★ Failure to give written two-week notice on Fridays to start on the following Monday will forfeits your deposit,, and any fees due must be paid.
- ★ Payments are to be made weekly or bi-weekly. HOURLY CARE IS JUST THAT
- ★ Weekly payments are due Friday before 4pm for online payments and checks only .All other are due before 5:30pm that Friday for cash payments
- ★ If your child's account becomes 4 days past due, your child is not permitted to return until all balances are receive with a \$20.00 late fee.
- ★ A \$35.00 fee will be applied for all returned checks or online payments. We don't take any out of state checks.
- All fee Assistancess or subsidy will be credited to your account ONLY!
No refunds. Any fee's not covered by Assistance services are the parent's responsibility.

Ask about Rates on oldest full time sibling DISCOUNT when you pay on time only, and **Discount when paid before 4 pm Friday before week starts available only for FULL time children..**

RATES for weekly scheduled hours starting January 1st 2011, overscheduled hours is the hourly rate.

Age	Weekly 30+ hrs	Daily 6-8	Part-time 3-5	Addition al Hours	Misc.
6 weeks-under 1 1/2yrs	150.00	38.00	22.00	\$4.00	Hourly is for under 3 hours
1 1/2-2	145.00	38.00	21.00	4.00	
3-5	140.00	38.00	20.00	4.00	
School Age 6	140.00 during vacations, school closings	38.00	20.00	\$5.00	Before & after care only \$50.00 for 10 hours minimum wky

1. The provider will be verbally notified by parent before arrival time if the child is not coming for the day, if not notified within 1 hour of scheduled arrival time child will be marked off for that day. Please use common curtsey and call. Parents must have their own back up daycare for closings & sick days.
2. The provider will be notified before pick up time if the parent will be late in picking up their child and a late charge of \$10.00 will still be applied for every 15 minutes. The difference in fee for the week will be applied to the following weekly amount if the child unexpectedly needs to stay later than contracted hours but never past the closing time for that day. NEVER PAST CLOSING TIME.

3. The provider will be paid for **all your child's** sick days, extreme weather Alert days ,federal holidays ,early closings and if parent and child's family go on vacation. **We also are Closed on all FEDERAL holidays and some early closings before the holidays see the list attached and sign, WE CLOSE for all Weather Alerts due to BEING UNSAFE TO TRAVEL you will have a 1 1/2 hour notice to pick up your child when we leave a message or call you. Thanks for understanding we are looking out for your child's safety. SEE CHANNEL 10 NEWS FOR CLOSING & DELAYS.**
4. The following people are allowed to pick up the child at the provider's home. A picture ID and age 18 years old or older will be required from the person picking up your child. If I.D. is not presented your child will not be released.

Name _____ Address _____ Phone # _____

Name _____ Address _____ Phone # _____

5. Emergency Telephone Numbers
(In addition to parents work number)
Neighbors or Friend _____

Other Important Numbers:

- a. _____
- b. _____

DO YOU HAVE LEGAL CUSTODY OF SAID CHILD? YES OR NO

I must have a copy of the court order recognizing the parent that has legal custody of the child along with a visitation schedule , otherwise I have no choice except to release the child to either of his or her parents”.

IF SO WE NEED A COPY ON FILE thank you.

6. Nature Walks around the block

I, _____ (Parent's Name) hereby authorize Sun, Stars & Moon to walk my son/daughter _____ (Child's Name) to and/or from Sun, and Stars & Moon Daycare around block for nature walks. **“In providing care to children it is impossible to prevent any and all accidents or injuries. In the absence of gross negligence, I will not hold Sun, Stars & Moon Daycare, its employees or agents liable for any injuries or damages occurring while the child is in their care. I further agree to hold Sun,. Stars & Moon Daycare, its employees or agents harmless, including reasonable attorney fees for any damages occurring to others by my child.”**

7. In the event that this contract needs to be terminated by Sun, Stars & Moon Daycare based on the best interest of the child and the other children in the daycare a written notice will be provided. Terminations of enrollment may be the result of:

- ★ Non-payment of weekly tuition for 4 days includes weekends
- ★ Abusive children, abuse to staff or property
- ★ Disruptive or dangerous behavior by parent
- ★ Daycare's inability to meet the special child's needs
- ★ Violation of Sun, Stars & Moon policies and contract & not following illness policy

Parents will be responsible for any legal or court fees or collection fees and including reasonable attorney fees incurred in setting delinquent accounts

8. This agreement can be changed or terminated by parent with two weeks written notice. All 2-week notices are due on Fridays before the week starts. . If written notice is not provided on the Friday before notice starts on Monday the parent will forfeit the deposit fee and pay any unpaid bills asap. No Verbal notices accepted.

9. All meals and snack will be USDA and healthy. If parents bring any snacks please bring ONLY healthy snacks to be shared with all 12-14 children plus providers even during the Holidays. Any special dairy or food items must have a Dr. Note and parents must supply.

10. Parents give permission for school age children to participate in activities outside the direct supervision of the caregiver. The parent understands that such activities must occur on premises of the daycare home, and that the provider will check on child every 15 minutes.

11. Private Web cam will be used daily so parents and family members, state licenser and federal programs can view children and staff. By signing below all parents agree to use while their child is in daycare. Also recordings.

I have read this agreement carefully and fully understand the policies of this daycare, I agree to all of the above and to attached napping agreement, illness policy, permission for topical creams, Federal holidays and Early closing days.

Signature of Parent's mother (both)

Date

Parent's father

date

Providers
Lisa Jones
& other Assistants

date

This contract has been reviewed and revised by James P. McClusky Law Firm, LLC
On January 20, 2011.

Napping Agreement Form

New York state regulations (NYCRR sections 416.7: 417.7: 416.8: 417.8) require that sleeping and napping arrangements must be made in writing between the parent and the provider. These arrangements include: The area of the home where the child will nap; whether the child will nap on a cot, mat, or crib; and how the napping child will be supervised.

NAPS:

My child may nap in (initial all that you allow):

daycare room other areas of house like living room,

My child may nap on (initial all that you allow):

cot porta crib other

I hereby give permission for my child (ren) to nap in a room where an awake adult is NOT present IF the provider physically checks on my child*(ren) every 15 minutes and ALL doors between the provider and my child (ren) are open. And child and providers will be on the same floor. If children are over night or during sleep hour's parent do give permission for provider to sleep and use a baby monitor in room where children will sleep in living room area on cot or in porta crib.

Parent Signature

Date

Sun, Stars & Moon Daycare Illness

policy

How to determine if your child will be permitted to attend daycare:

1. **No temperature greater than 101.4 for that 100.4 degrees under arm for child –INFANT 100.4 is unable to return back to daycare until fever free and Tylenol Motrin, PAIN MEDS free for 24 hrs. Plus 24 after the start of prescription medications REGARDLESS.**
2. **Vomiting-** the child must be able to keep food/liquid down for before returning to daycare and eat regularly 24 hrs.
3. **Diarrhea- (three loose stools)** and your child will need to be sent home and can not return until 24 hours free from loose stools if side effect by medication then it is ok only if they don't run out diaper or cloths need proof of meds or if it's a condition noted on medical report then ok.
4. **Skin rashes-** under no condition will you be allowed into daycare with a Raw rash must be healed ,Or any bumps /rash on body must be checked can't be contagious in order to return. not included regular diaper rashes,heat rashes, skin conditions, skin allergys .
5. **Pink eye 24 hours after treatment has started and no leaking from the eyes at all; bring meds to daycare to be applied if needed after 24 hrs.**
6. **Head lice-** If you are identified as having head lice you are not permitted back to daycare until you have been checked by the daycare provider saying that you are nit and lice free.
7. **Severe mucous Example : or continuous runny nose for 10days**
8. **Uncontrollable coughing get dr. note especially if it's Asthma and bring meds if neededwith state medical form filled out, This doesn't include the occasional cough due to a cold or post nasal drip.**
9. **Hepatitis A**
10. **Coxsackie**
11. **Uncontrollable crying for 30 minutes and no colic babies**
12. **Bronchitis or any upper respiratory symptoms (Uri) NO DAYCARE UNTILL 24 after start of meds**
13. **Gastro intestinal disease or illness**
14. **Chicken pox not when sore are open**
15. **Strep throat – you must be on the antibiotic 24 hrs and no fever before you are able to return to daycare 1 full day out of daycare**
16. **Measles**
17. **Tuberculosis**
18. **Scabies**
19. **Impetigo**

NO DOCTORS NOTE NEEDED FOR NUMBERS 1 TO 7. Otherwise we follow all public health guidelines when trying to prevent serious illness. All parents are required to keep their child's shots up to date please provide us with a photo copy of their current and updated shot records.

Parent's Signature _____ Date _____

I give

Permission to use spray
Sunscreen, rash cream, lotion,
diaper cream, and all over the
counter topical creams

My child _____ may have sunscreen applied to exposed skin areas before going outside on warm sunny days in afternoon. If more is need when we are going outside in the afternoon.

I will provide a sunscreen with protection factor (SPF) of 15 or more (without PABA is recommended). PABA gives some children rashes.

I will mark my child's name on his/her sunscreen PLASTIC container with a permanent marker. Parent will apply SUNCREEN on their child before arrival in morning.....We will follow all state and federal guidelines when applying all creams.

Signature of Parent/Guardian:

_____ **Date:** _____