

# Adventure Preschool

41 Forest Lawn Ave 2<sup>nd</sup> Floor

Stamford CT 06905

(203)993-9665

[www.AdventurepreschoolCT.com](http://www.AdventurepreschoolCT.com)

## Contract

This contract is between \_\_\_\_\_ and Nancy Aguilar for the care of \_\_\_\_\_ DOB \_\_\_\_\_.

### Agreed upon hours of care

Monday \_\_\_\_\_ to \_\_\_\_\_

Tuesday \_\_\_\_\_ to \_\_\_\_\_

Wednesday \_\_\_\_\_ to \_\_\_\_\_

Thursday \_\_\_\_\_ to \_\_\_\_\_

Friday \_\_\_\_\_ to \_\_\_\_\_

### Terms of payment

The agreed fee is \$ \_\_\_\_\_ per week. This fee must be paid in full by the agreed hours, regardless of the child's current attendance. The fee must be paid before providing services on Fridays when the child is left at Adventure Preschool. If Adventure Preschool is closed on this day, the fee must be paid one day before closing. Payment methods will be in cash or personal checks.

**Late payment fee:** A late fee of \$20.00 will apply for late payments. Provider can terminate this agreement for late payments.

**Changes in fees:** Child care fees will be reviewed annually. Parent/guardians will be notified of any changes to fees in advance.

**Accepted methods of payment:** Accepted methods of payment are Cash or Check

**Bounced check:** If a check is bounced by the bank, a fee of \$ 30.00 must be paid plus the \$20.00 late fee. If a check bounces twice, parents must pay cash from then on.

**Deposit:** Upon signing this contract a \$ \_\_\_\_\_ deposit is due to Nancy Aguilar. This deposit will cover the last week your child will attend Adventure Preschool.

**Families receiving Care 4 Kids:** Parents/guardians receiving assistance from the Care 4 Kids program are still responsible for paying any and all amounts not covered by the subsidy program, either if not approved for the whole amount or if payments are discontinued.

**Overtime fee:** Overtime is considered any amount of time that care occurs prior to the scheduled drop-off time or after the scheduled pick-up time. The overtime rate is as follows:

With advanced notice by the parents/guardians and approval by the provider: \$1.00 for every 10 minutes late.

With no advance notice: The fee is \$5.00 for every 10 minutes late.

### **Child absences**

The fee must be paid in full for the agreed hours; regardless of the hours / days the child attends Adventure Preschool. If the child does not attend for:

**Illness:** Please notify if your child has a contagious disease. Alternative arrangements must be made for the child until the danger for other children has passed. You are responsible to pay Full tuition even if your child is absent.

**Family vacation:** Please give two week written notice; you are responsible to pay half of tuition for one week vacation.

### **Adventure Preschool closures:**

Adventure Preschool is closed when public schools are closed and the total fee must be paid.

If the holiday falls during the weekend, the child care will be closed on the weekday the holiday is observed by the federal government.

**Adventure Preschool will be closed for 2 week vacation. Parents / guardians must pay the full fee for those 2 weeks; they will be anticipated 3 weeks before.**

**Termination procedures**

**Parents/guardians must give two weeks written notice prior to the last day of care. Payment is required for these two weeks regardless of whether the child attends and regardless of any other term in this contract.**

**The provider can immediately terminate this contract without any notice.**

**Signature of parties to contract**

- a. **A failure to enforce one or more terms of this contract does not waive the provider's right to enforce any other terms of this contract.**
- b. **All parents/guardians are responsible for reviewing and understanding this child care's policies, procedures, and regulations. By signing this agreement, you certify that you have received a Parent Handbook and that you agree to respect the policies and procedures outlined within. The provider can review and make changes in policies and prices at any time. Parent/guardians will be notified of such changes in advance.**
- c. **This agreement is valid beginning on: \_\_\_\_\_**
- d. **Child's start date: \_\_\_\_\_**

\_\_\_\_\_  
**Parent/Guardian Name**

\_\_\_\_\_  
**Parent/Guardian Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Parent/Guardian Name**

\_\_\_\_\_  
**Parent/Guardian Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Nancy Aguilar**  
**Adventure Preschool**

\_\_\_\_\_  
**Date**

**Thank you for your trust. I look forward to a happy and productive year with your child.**