

## *Little Pirates Contract/Liability Agreement*

**Child Information:**

Full Name \_\_\_\_\_ Age \_\_\_\_\_  
 \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Anticipated Start Date for  
 your child \_\_\_\_\_

**Contracts for Service:** Contracts for Little Pirates are completed at the start of service. **Contracts can be modified by giving at least a two-week written notice to the program director.** We require payment for program usage biweekly by the second and fourth Friday of each month or as indicated by your agreed payment schedule below. Contracted participants will receive a biweekly e-mail bill for your child’s usage of the program on or before the second and fourth Friday of each month. If a child attends the program more than his/her contracted days – the walk-in rate will be charged. Payment is to be collected up-front for all walk-in’s or special activities without an active contract. An additional fee of \$30 will be added for bad checks. Parents will be notified immediately upon receipt of the NSF notice by the program and have a maximum of five school days to pay outstanding tuition in full. You will be required to make future payments in cash or through auto pay only. An additional fee of \$10 will be added to your bill for late pay. You will have until the next billing date to pay the outstanding fee. If the fee has not been paid by then your family will be let go until your outstanding bill is paid. At this time your children may return to the program if space permits. Overtime fees will be charged after contracted pickup time in 15 minute increments, rounded to the next highest increment. Fees are as follows: \$5/child/15 minute increment.

School year Examples: One child picked up at 6:10 p.m. = overtime fee of \$5  
 One child picked up at 6:25 p.m. = overtime fee of \$10

The Staff member on duty’s cell phone is the ‘official’ clock by which time will be determined. Late fee will be due at time of pickup the same day.

**Current Fee Schedule:** The program operates the following weekly fee schedule but does not charge for days it is closed for health, holiday or weather reasons. The program allows walk-in participants as space permits.

**Current Fee Schedule is as follows:**

Full Day Contracts:

<b>7:00am-6:00pm</b>	<b>Contracted</b>	<b>Under 2 yrs</b>	<b>2yr or older</b>	<b>Additional Children</b>	<b>Walk-in</b>
	2 days/week =	\$66/week	\$64/week	\$56/week	*\$35/Full day (> 5 hours)
	3 days/week =	\$96/week	\$93/week	\$81/week	*\$25/Half day (≤ 5 hours)
	4 days/week =	\$124/week	\$120/week	\$104/week	
	5 days/week =	\$150/week	\$145/week	\$125/week	

**Mid-Day Contracts: (only available for 5 hour contracts)**

<b>9:00am-3:00pm</b>	<b>Contracted</b>	<b>Under 2 yrs</b>	<b>2yr or older</b>	<b>Additional Children</b>	<b>Walk-in</b>
	2 days/week =	\$33/week	\$32/week	\$28/week	*\$35/Full day (> 5 hours)
	3 days/week =	\$48/week	\$46/week	\$40/week	*\$25/Half day (≤ 5 hours)
	4 days/week =	\$62/week	\$60/week	\$52/week	
	5 days/week =	\$75/week	\$72/week	\$62/week	

Breakfast, Lunch and Snacks are included in the program cost (with the exception of formula/food for infants)

**Before/After School Contracts: Ages 5-13 years**

**Contract Fees (one fee for both)**

2 days/week = \$15.00/week      Full No School Day \$30/Full Day (walkin rate if not normal contract day)  
 3 days/week = \$21.00/week      Half No School Day \$20/Half Day (walkin rate if not normal contract day)  
 4 days/week = \$26.00/week      Plus \$5/Early release or Late Start on top of contract  
 5 days/week = \$30.00/week

**Payment Information Continued**

**\*Please Note: Families are allowed one week (equivalent of contracted time) of Vacation in the summer and one week**

**in the school year. You need to request this vacation at least 7 days in advance in writing. Handwritten notes, text messaging, and emails will be accepted forms of communicating vacation.**

\*If your family qualifies for childcare assistance and it is established we also accept that as a form of payment.

**Days contracting service for:** Please Circle *Note: If participating in a special program that is once a week – circle*

*Walk-in.* 2 days/week 3 days/week 4 days/week 5 days/week

**Indicate which days and times your child will normally be in attendance:**

Please Circle Days and indicate pick up time.

Monday Tuesday Wednesday Thursday Friday Varies

Pick up time \_\_\_\_\_

*If you marked Varies - Please visit with the program director to discuss your situation or explain below:*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Your monthly fee for service will be due on the second and fourth Friday of every month. **Invoices are emailed biweekly** but you can make payments weekly.

If you have any questions or concerns regarding this contract, please discuss this with the Program Director. 605-852-3234

Signed \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_ **(Please fill out waiver on reverse side)**

**READ EVERY LINE**

***Little Pirates Childcare Center  
Handbook Acknowledgement and Waiver Agreement***

In consideration of my child’s participation in the Little Pirates Childcare Center I agree to the following:

1. I acknowledge that I have received a paper or electronic copy of the current program handbook that outlines all policies of this program. I understand that the handbook has more policies and that all policies are explained in greater detail than what is indicated on this waiver agreement. I acknowledge that I have read this handbook and that I understand and will honor all policies as set forth.
2. I understand that a group texting service called “Procure” is used to communicate program happenings with parents/guardians. Enrolling my child into the program gives the director permission to enroll the parents' contact information into the ‘Procure’ service. I agree to use this text service for the best interest of the program. If I have a message that needs to be sent to the program director alone, I will remember to send it to their private number.
3. I agree that I will pay all current charges by the second and fourth Friday of each month or as agreed upon in my preferred payment schedule, including additional day and late fee charges. Failure to follow said policy could result in additional fees and or dismissal from the program.
4. I understand that if I contract for services, I am allowed one week of vacation/extended illness absence during the school year and one week during the summer with advanced notice. I will notify the program director in writing within a timely matter (preferably at least 3 days notice for vacations and as soon as possible for illness). I will indicate that I want vacation credit applied and will not assume the director knows this information.
5. I agree that I will pick up my child/children no later than **6pm each day**. I understand that it is my responsibility to provide an alternative arrangement for the picking up of my child/children if I am unavailable. I understand that disregard of said policy will result in additional late charges and possible suspension or dismissal from the program.
6. I understand that due to liability issues, the program staff cannot administer medications without having written consent from the parent/guardian. All medication needs to be in its original container and labeled with that child’s name with clear instructions on dosage.

7. I understand that if my child has a known medical condition that I have notified the director of what to do if a problem should occur during program hours. I also understand that if my child has any one of the following conditions, I will be required to pick up the child immediately: Contagious Disease, Fever over 100 degrees Fahrenheit, Vomiting or Diarrhea, Accident Requiring Medical Attention.
8. I understand that additional program fees for special events may be added to my invoice if my child's participation. Parents will be notified of any additional fees via group messaging prior to signing the child up for the event or activity. (i.e. dance costumes, carnivals, special events)
9. I also understand that the program participates in supervised walks, outdoor and indoor play and I give permission for my child to take part in these activities each day of the program. I also understand that the program will involve periods of physical activity in which my child will be expected to participate to the best of their ability. Any physical limitations and expectations should be communicated with the program director.
10. I understand that the children may be bussed to events, field trips, and activities. This is a complimentary service provided by the program and the children will be expected to follow bus rules and behave appropriately.
11. I also give the program permission to photograph my child for media purposes. At times, news articles and information will be printed or submitted to newspaper or other community publications/media/social media for the purpose of advertising and promotion of this program. **(please select an option)**
  - I consent to the photo release agreement. \_\_\_\_
  - I do not consent to the photo release agreement. \_\_\_\_
12. I understand that it is the program's policy to apply sunscreen to all children when outdoor activities take place and to use bug spray when warranted. I give the program permission to apply sunscreen and bug spray to my child. If my child has allergies or sensitivities to either product, I understand that I will have to provide an alternative product (sunscreen must be SPF 30 or higher) to use in its place.
13. In an emergency, I give my permission to the program staff to have my child treated by medical personnels. The staff member in charge shall make reasonable attempts to contact me prior to and during emergency medical treatment.
14. In consideration of my child being allowed to participate in this recreation program, I agree to assume all risks of such activity and hereby release and hold harmless Little Pirates Childcare Center along with the Highmore-Harrold School and their agents, employees, volunteers, instructors, and student interns from any and all claims, suits, losses, or causes of action for damages, for injury or death, arising out of or related to my child's participation in our child care program.

I have read the foregoing carefully and I understand its content. Any questions which may have occurred to me concerning this liability waiver have been answered to my satisfaction.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_