RAINBOW JUNCTION, LTD. CHILD CARE CENTER CONTRACT 2019-2020 PARENT MAIL BOX #_____

Parent's Name:					
Address(s):					
Email address(s):		Work Phone: Main Ph		one Co	ell Phone
Email address(s):		Work Phone: Main Ph		one Cell Phone	
Forms: Registration	Infant Feed	CACFP Inco	me Documentation	Blue Card	
Γhe following is a cor	ntract for services betw	veen RAINBOW JUNCTI	ON, Ltd and		·
Γhe contract will be f	or the period beginnin	g	and ending		
	Enro	olled Children (Ent	ter Youngest Child	l First)	
First Name					
Last Name					
Birth Date					
Program					
Typical Hours					
	Please Circle Mo	eals and/or Days that t	the Child is expected t	o be at the Center	
Meals & Snacks	BF/LUNCH/AM/PM	BF/LUNCH/AM/PM	BF/LUNCH/AM/PM	BF/LUNCH/AM/PM	BF/LUNCH/AM/PM
Full Day	M/T W/TH/F	M/T W/TH/F	M/T W/TH/F	M/T W/TH/F	M/T W/TH/F
Summer/Non School Vacation	M/T W/TH/F	M/T W/TH/F	M/T W/TH/F	M/T W/TH/F	M/T W/TH/F
	School Age Children	n (Before or After Scho	ool, Before and After S	School [Wrap Around	i]}
Before School	M/T W/TH/F	M/T W/TH/F	M/T W/TH/F	M/T W/TH/F	M/T W/TH/F
After School	M/T W/TH/F	M/T W/TH/F	M/T W/TH/F	M/T W/TH/F	M/T W/TH/F
Before and After School	M/T W/TH/F	M/T W/TH/F	M/T W/TH/F	M/T W/TH/F	M/T W/TH/F
		OF CONTRACT (Pleaweekly payments req			
Annual (52)	School Year (37)	School Vacation (5)	Summer (10)	Per Diem (Daily)	Other

HOUSEHOLD WITH "EARNINGS"). One month of pay stubs are required (generally 4 or 2 stubs), except for full time college students (a school schedule is required) and/or the 1040 IRS tax form for individuals that are self employed, part of a partnership or an S-Corporation. Changes in income must be immediately reported to Rainbow Junction and CACFP. Related forms and fees may need to be adjusted based on the income changes.

Page 1 of 2 Revised August 1, 2019

I/we agree to the following:

A. PAYMENT OF FEES:

FEES ARE DUE AND PAYABLE EACH MONDAY -

- -Pay fees in full as agreed above weekly for the contract period (weeks). Full time is (3 days or more) or part-time.
- -All fees are annualized, parents pay same fee each week, regardless of attendance for the contracted weeks. (This includes school vacations, holidays, ½ days and conference days for the school year contracts).
- -There is no adjustment in fees for changes in or termination of contract, except whenever a child ages to another program or the Parent subsidy changes. Two (2) weeks written notice is required for any change in the contract a weekly fee will continue to be charged in lieu of notice plus any late fees.
- -Payments due over 60 days are referred for collection (including late fees) and your child may be excluded until paid.
- -Late payment fees of \$25 are charged to accounts with over 60 days past due activity. There is a \$35 fee charged for returned checks. Collection and/or legal fees to collect past due accounts will be added to the parent account.
- -Fees not covered by subsidy and subsidy co-payment are the responsibility of the parent. The parent is responsible to file the appropriate DSS or CACFP paperwork to determine subsidiary. Rainbow Junction will provide assistance, if needed.
- -Checks or money orders should be payable to Rainbow Junction and placed in fee box by Director's office.

DO NOT LEAVE CASH without receiving a receipt.

B. REGISTRATION, HOLDING, FIELD TRIP, LATE PICK UP FEES:

- -Annual Registration fee: \$25 per child, infant through school age child.
- -Holding fee: discounted fees charged for 2 days per week for extended absences of 4 or more weeks for maternity/health, college breaks, etc with written agreement and notice we'll try to include in annualized fees.
- -Transportation and admissions fees will be charged as they occur.
- -Late pick-up fees, begin at 1 minute after closing time (6:01, 3:15 {3PK}) and are \$1.00 per minute per child. Children not picked up by 6:15 with no parent contact will be considered abandoned and reported to local police.

C. OTHER:

- -Exclusion from care can be due to: illness, behavior, parent conduct, non-payment of fees.
- -Absence notification: parents need to call or let us know of absences by 8 am if children won't be attended for the day.
- -Parents are required to keep current family contact, financial, immunization records and release information forms on file.
- -Release Information: For persons who may act on behalf of the parent and persons authorized to pick children up, custodial information is required to be current and listed on registration forms. Photos are required of each person.
- -Health information: A medical exam is required upon enrollment and annually for infants through pre-k, school-agers only upon enrollment. Immunizations are required to be current. A health plan required for children with special health care needs (epi-pen or inhaler). Authorization to use topical OTC lotions, creams and jells are on back of registration form. ALL dietary or other special needs information are required to be documented by medical professional on medical form.
- -Center closings: contract covers 8 paid Center closings (Labor Day, Thanksgiving Day and Friday after, Christmas Day, New Year's Day, Memorial Day, Independence Day and 1 staff development day). Center closes at 4pm Christmas Eve and New Years Eve.
- -Breakfast/Food: Breakfast served until 8:00 am no food may be brought into the Center for children unless staff are notified and only commercial un-opened items are allowed. The contract covers an AM and PM snack, lunch, breakfast for all ages.

	Tot all ages.
D.	FUNDRAISING: - I agree to volunteer my time to help at Breakfast with Santa; Breakfast with the Bunny
Ε.	BUILDING AND GROUDS MAINTENANCE: - I will help with the following: Building maintenance; Garden/sidewalk; Road Clean up; Serve on the Board of Directors
Μì	PARENT HANDBOOK & POLICIES: I have been given and read the Parent Handbook and agree to abide by the policies of the Center as stated therein and any addendum's including exclusion policies for illness and conduct issues. I UNDERSTAND THAT BY REGULATION I MUST SIGN MY CHILDREN IN/OUT EACH DAY UTILIZING THE COMPUTIZED ATTENDANCE SYSTEM. I HAVE READ AND UNDERSTAND THIS CONTRACT FOR SERVICES AND I AGREE TO ABIDE BY IT. Y SIGNATURE BELOW INDICATES I AM FINANCIALLY RESPONSIBLE FOR ALL COSTS INCURRED AND THE TOTAL ES DURING THIS CONTRACT PERIOD.
Pa	rent Signature Date RBJ Director Date

Page 2 of 2 Revised August 1, 2019