



**FAMILIES FIRST  
CHILD CARE**  
 DIRECTOR: BRENDA PROFITT  
 255 OLSEN ROAD  
 BOARDMAN OREGON  
 541-771-1554

**CONTRACT AND FINANCIAL AGREEMENT**

Families First Childcare Center Handbook of Policies and Procedures explains all the policies in place at the childcare center. This Agreement is reviewed annually at which time a new updated Handbook will be given to Clients. If changes are made to the Handbook throughout the year, clients will be notified in writing a minimum of two weeks in advance.

**CONTRACT EFFECT DATE:** \_\_\_/\_\_\_/\_\_\_ Referred By \_\_\_\_\_

**THIS CONTRACT** is between Parent/Guardian Name(s) \_\_\_\_\_, and \_\_\_\_\_, (herein called client(s)) and Families First Child Care (herein called Provider).

**PARENT EMAIL:** \_\_\_\_\_

\*All invoices will be sent to this address.

**PARENT PHONE NUMBER: (M)** \_\_\_\_\_, **(F)** \_\_\_\_\_

**CHILD CARE SERVICES** will be provided by the Provider for the following child:

**Child's Full Legal Name:** \_\_\_\_\_ Birthdate: \_\_\_/\_\_\_/\_\_\_ M \_\_\_ F \_\_\_

**CONTRACTED DAYS/TIMES:** 1-3 days is considered part-time; 4-5 days is considered full-time

(circle days needed): **Monday Tuesday Wednesday Thursday Friday**

from \_\_\_\_\_ am/pm to \_\_\_\_\_ am/pm beginning on **(Start Date):** \_\_\_/\_\_\_/\_\_\_

Note any exceptions to the above: \_\_\_\_\_

**FEES (due regardless of attendance):**

**Monthly Child Care Fee:** \_\_\_\_\_ To be paid by the 1st day of the month of service.

**All checks and money orders must be made to: FAMILIES FIRST CHILDCARE.**

**Checks and Money Orders may be mailed to:**

**FAMILIES FIRST CHILDCARE CENTER.  
 PO BOX 786  
 BOARDMAN, OR 97818**

**No cash is accepted.**

Payments are not to be made to the Childcare Center or given to any teacher directly.

**ADDITIONAL FEES: Clients** are expected to pay any of the following Additional Fees within 24 hours.

**Late Payments:** Clients will pay \$10 per child per calendar day (including weekends) that payments are received late beginning the morning after the fee due date. Fee will start being charged on the 5<sup>th</sup> day of the month.

If full payment including late fees has not been made by the 15<sup>th</sup> of the month, your child can no longer come to the and you will have until that last day of the month to bring your account current or you will lose your child's spot in the Daycare.

**Returned Checks:** Clients will be billed a \$35 penalty fee plus any other fees the Provider incurs as a result.



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**Unauthorized Early Drop-Off/Late Pick-Up:** Clients are not permitted early or late drop off/pick-up. Clients will pay a late/early fee equal to \$10 per 15 minute per family (1-15 minutes early/late = \$10).

**Authorized/Overtime Early Drop-Off/Late Pick-Up:** Clients will pay in 1-hour increments equal to \$32 per hour per family for approved overtime requests.

**RESERVATIONS:** Upon enrollment, the Provider will hold an open childcare space for a period of one month without payment. Beginning with month two, the Provider will hold the space for 1/2 of the Client's monthly childcare fee. Childcare fees made during this holding period are non-refundable and will not be credited towards care once care begins. Clients acknowledge that if they do not use childcare services for a period of 1 month or longer, the Provider has the right to cancel this agreement.

**DROP-IN ONLY ENROLLMENTS:** Clients may consider drop-in childcare to be done on an as needed and space-available basis. Clients agree to pay for drop-in care at the time of the approved request. Clients agree that if they withdraw their request for care within 48 hours of the requested time, the Provider will not refund the payment. Clients acknowledge that if they do not use childcare services for a period of 2 weeks or longer, the Provider has the right to cancel this agreement.

**CHILD CARE CLOSINGS:**

**Holidays**

- \*New Years Day
- \*Martin Luther King Day
- \*President's Day
- \*Memorial Day
- \*Juneteenth
- \*Labor Day

- \*Veteren's Day
- \*Thanksgiving Day
- \*Day after Thanksgiving Day
- \*Christmas Eve
- \*Christmas Day

**Staff Vacation**

- \*The full week of July the 4th

**Pandemic**

If the Morrow County Health Authority (MCHA) deems it necessary for the center or any of its classrooms to close for a period of days (determined by the MCHA), then the center will notify parents of this action and what the anticipated next steps will be to remain in compliance with the MCHA mandate.

**TERMINATION:** Clients and Provider agree to give three weeks written notice of intent to terminate this agreement, commencing on the first Monday after written notice is received. Three-week childcare fees are due in one lump sum immediately upon the written termination notice if at the first of the month. If notice is not given, the child is not in attendance, and/or the childcare is closed, the final three weeks' fees will not be credited. Anything previously paid beyond the three weeks is eligible for reimbursement.

**Provider** reserves the right to issue an immediate Termination of this contract for any of the following: lack of compliance with Handbook policies, non-payment, late payments, bounced checks, lack of Clientele cooperation, disrespect, failure to complete and return required forms, physical or verbal abuse of any person or property on the child care premises, serious illness of Provider or Provider's family member, continual disciplinary problems, false information given by Client.

**Privacy Permission Agreement**

Families First Child Cares' priority is to protect the health and safety of every child. To ensure that the program is operating with the client's full understanding and agreement about the client's family's privacy, we ask clients to grant permission to conduct the following activities. Please check off each item to which the client gives consent, and sign below:

\_\_\_\_\_ Placing photos of your child around the classroom.



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- \_\_\_\_\_ Giving copies of photos of children to other families receiving care.
- \_\_\_\_\_ Placing photos of the child in photo albums for viewing by prospective clients and other families receiving care.
- \_\_\_\_\_ Using photos of children in my marketing flyers.
- \_\_\_\_\_ Using photos of children on our website.
- \_\_\_\_\_ Posting artwork and other crafts that include children's names around the classroom.
- \_\_\_\_\_ Listing the name of the client's child or other members of the clients' family in the client newsletter and/or posting this information on the bulletin board in the classroom.

**ACKNOWLEDGMENTS:**

- \*\* Client agrees to provide all supplies requested by Provider. Client understands if required items are not supplied, the Provider will purchase them, and Client will reimburse Provider for the full cost plus the Provider's time in acquiring those supplies.
- \*\* Provider will supply preschool activity fees, napping beds, snacks, and Tender Loving Care etc.
- \*\* Client agrees to comply with respect and to take seriously: All policies in the Families First Child Care Handbook of Policies and Procedures and the Financial Contract
- \*\* The Client agrees to pay all fees associated with any collection of unpaid debt.
- \*\* The Client acknowledges that lack of enforcement of a Policy by the Provider does not mean the Policy is no longer in effect.
- \*\* Provider will give Client a minimum two-weeks' notice of any fee change.

This agreement contains the entire understanding between both parties and supersedes any prior understandings and/or written or oral agreements between them. Any agreement hereafter shall not change nor terminate this agreement, unless it is in writing and signed by both parties.

By signing this page, the client indicates they have read the policies and agree to follow them. Families First Child Care reserves the right to make changes to the policies without notice. The client also agrees to follow any new policies made in the future.

**By signing this agreement, the Client agrees to comply with all the terms covered in this Contract and Financial Agreement.**

**Client understands this is a legally binding contract between all parties signed below.**

Client/Guardian Signature/Date: \_\_\_\_\_

Client/Guardian Signature/Date: \_\_\_\_\_

Provider Signature/Date: \_\_\_\_\_