



Parent/ Provider Agreement
1508 Reggio Aisle Irvine, CA 92606

(949)444-4624

(949)536-5733

It is our sincere desire to provide responsible and loving care for your child. You should feel confident that your child will be safe and happy with us. The Little LeaderZ will work with you to help your youngster develop emotionally, physically, socially and mentally at his/ her development stages and will work with the child to enhance their individuality and independence. It is understood that each child is to be treated as equally of the provider's own. We welcome your suggestion and input so that you are completely happy and comfortable with your childcare arrangement. We offer programs for infants, toddlers and preschoolers. The following agreement should keep our relation mutually satisfactory.

Child Name: Parent Name:

Desired child care days and hours:

Hours of operation: 7:00 AM- 6:00 PM Mon. Tue. Wed.

Arrival:

Departure:

Please notify us by 8:30 AM if the child unable to attend.

Payments:

Child's date of birth: Starting Date:

For the above listed hours and days of care, we agree to pay \$ _____ per _____. We understand that this is a guaranteed rate and include full pays for holidays with no credit for absent days including your vacation days or absences due to illness or any other reason and just five days the provider's vacation in a year. Payment is due the first day of the week the child is due to arrive. An advance notice period of two weeks is required to withdraw the child from the facility. One- week advance payment is required which will be reimbursed as payment for the final week of attendance. The providers reserve the right to discontinue enrollment at any time with no notice required.

Additional fees of \$10.00 per hour will be charged for pre-arranged extra time in excess of contracted time. Fees are charged in 1/2 hour increments.

There will be \$60.00 registration fee, which is non-refundable.

Checks will be accepted. There will be a fee of \$30.00 for returned checks.

Trial Period:

Thurs. Fri.

Either party may terminate the contract within two weeks of care without advance notice the registration fee plus any fees for care provided by the facility will be kept by provider.

Visit:

Parents are welcome to drop by at any time to check on their child's well being.

Holidays:

The Little Angels will observe the following paid holidays:

New Year's Day and the day after
Martin Luther Kings' Birthday

July 4th

Labor Day
Thanksgiving Day and the day after

Christmas day and the day after
Persian New Year Friday (3rd of March)

Meals:

The facility is committed to provide the children with nutritious meals when your child is able to eat most table foods. The following schedule will be followed:

Breakfast: 7:30 AM

Snack :10:00 AM

Lunch :12:00 PM

Snack : 3:00 PM

Supplies:

On the first day of the care, please provide the children with the following items: Extra clothing (2 sets minimum), two small blankets and one pillow.

Diapers/ Diaper cream/ Wipe/ Tissue

Medicine:

Any prescription medication to be administered must come in labeled prescription containers, currently dated, with child's name and dosage imprinted. Any non- prescription medication will be administered, if provided by parent. By signing this agreement, parents are giving the child care provider on duty to apply antiseptic and first aid cream to a minor cut, scrape or wound. Also the childcare provider will be permitted to administer Tylenol/ Tempura for minor condition such as teething or fever. In the event of fever, a reducing medication will be used and parent(s) will be immediately notified.

Daily sign in

The sign in/ out form must be completed on a daily basis, with first and last name written legibly by authorized persons.

Illness:

A child with contagious illness such as fever, diarrhea, and colored discharge from eyes, unusual spots or rashes will not be allowed at the facility. If a child becomes ill, parent or the emergency contact person will be notified. The child will be separated from other children to reduce the risk of virus transmission to other children. The parent is responsible for the payment of medical expenses incurred in the care and treatment of your child remains with the parents of each child. The medical, health and accident insurance of each parent should be used to pay any medical bills incurred in treating your child for illness or injury.

Immunization record:

Please keep your children immunization up to date and provide us with a copy of the child immunization history.

Dress:

Please dress your children according to the weather situation and in comfortable play outfit.

Field trips:

We will give permission for our child ----- for occasional field trips, supervised walk in the neighborhood and trips to the park, taking pictures or video. Yes-----
No-----

At the Little LeaderZ Daycare, we provide a healthy, happy and loving family environment just as you would like for your child We want you to feel secure and have a peace of mind about your child while you are at work, home or school. We are committed to provide the highest quality of professional childcare in your absence. We believe that open communication and mutual respect is the key to a happy, long-lasting relationship between a childcare provider and the child's parents. Please feel free to keep us informed of anything that affects your child and we will do the same. Please make a copy of the agreement for yourself if you wish to.

I have received and read the attached child-care contract and rules and agree to comply with all the rules and responsibilities stated in them.

_____ Parent Signature Date

_____ Parent Signature Date

_____ Provider Signature Date