

Good Shepherd Lutheran Childcare
4311-104th Street, Pleasant Prairie, WI. 53158
Phone: 262-694-4405
gschildcare06@gmail.com

FINANCIAL AGREEMENT OF RESPONSIBILITY

Name of Child/Children _____

Person(s) Responsible for Payment _____ Phone _____

Address _____ City _____ State _____

****A Non-Refundable Registration Fee of \$25 for under 20 hours per week (part-time) and \$50 for over 20 hours (full-time) per child is paid upon enrollment. Not to exceed \$100/family.**

****Childcare billing is done weekly: \$6.25/hour under 2 years \$5.25/hour ages 2 and older. Incidental Rate \$7.25/hour under 2 years \$6.25/hour ages 2 years and older.**

There is a 25% discount for multiple children.

****Childcare billing is done each Monday with payments due by Friday that same week.**

****Accounts that are 1 week past due will be assessed a \$10 late fee and your child will not be able to return until it is paid in full, unless communicated to the Director.**

****30 days past due accounts will be referred to a Collection Agency.**

Payments accepted: Checks-payable to Good Shepherd Lutheran Church or GSLC,
Cash, or Zelle with ChaseQuick Pay (using contact goodshpeherdtreasurer@gmail.com)

SIGNATURE OF PERSON(S) RESPONSIBLE FOR PAYMENT

Signature

Date

Signature

Date

Childcare Director

Date

GOOD SHEPHERD LUTHERAN CHILDCARE CONTRACT

This contract is entered into by and between _____ Director of Good Shepherd Lutheran Childcare (GSLC) and _____ (parents/guardian) for the provision of childcare for _____(child/ren). This contract can be terminated by Parent(s)/Guardian(s) (or immediately by the Director if needed) by giving a written notice 2 weeks prior to the last date of attendance. Parents will still pay from the date that the Director receives the written notice until the last day of attendance (minimum of 2 scheduled weeks later).

Registration

The following forms must be completed and received by GSLC before care begins:

- *Signed Childcare Registration Form w/Registration Fee
- *Copy of Immunization Records & Health Form
- *Signed Contract & Financial Agreement of Responsibility

The information on these forms must be kept current. If there is any change, I do hereby agree that I shall notify the **Childcare Director** immediately.

I understand that if my child is ill or will be arriving late, I must call Rebekah MacDougall at least 1 hour before my child's arrival time. I further understand that if I do not call my child in, I will be charged my child's full scheduled time. Illness is the only excusable absence for billing purposes.

I understand that I must give the Childcare Director 2 weeks notice (on a Monday) for a change in schedule. My child's schedule is due 2 Monday's before the date care is needed. Anything after that time is subject to availability and if available, will be billed at the *Incidental Rate. Please supply a monthly schedule if possible. Any hours added to my child's scheduled hours after the 2 weeks notice, will be billed at the Incidental Rate if those hours are available. There is a 10 hour per month minimum of attendance. If these 10 hours are not met, I will be responsible for re-enrolling (repaying the registration fee) my children.

I will pay all tuition and fees in a timely manner.

I understand that as our Childcare grows and evolves this may reflect changes to our policies and activities. I will be notified in writing of these changes

We/I agree to all the terms of the contract and agree to abide by all the regulations stated in The Parent Handbook. Please do not sign this if you have not read through the Parent Handbook.

____I have received a copy of the Parent Handbook(available upon request) or I am responsible for reading the Parent Handbook online. www.goodshpeherdluth.org

_____(Mother's or Guardian's Signature)

_____ (Father's or Guardian's Signature)

_____ (Director's Signature)

___ One or both parents (or guardians) have read The Parent Handbook online.

___ One or both parents (or guardians) have read The Parent Handbook given to us by provider.

*Incidental Rate-anything that is not scheduled by 2 Monday's before the week care is needed.