



# TIGER KIDS CLUB CHILDCARE SCHOOL YEAR 17 - 18 CONTRACT FOR CARE

■ BS  
■ SK  
■ CE

## Schedule & Fee

Fees include breakfast, and a snack.

Preschool Care Schedule		
<b>Student Name:</b>	District Resident? Y / N	<b>Start Date:</b>
<b>Student Name:</b>	District Resident? Y / N	<b>Start Date:</b>
Care Schedule	Hot Lunch Included	No Hot Lunch
<input type="checkbox"/> Set Schedule 2 day minimum/wk	M T W Th F \$40/day	M T W Th F \$38/day
<input type="checkbox"/> Variable Schedule 6 day minimum/mo	Minimum 6 days per month. 6 days will be billed for each month regardless of attendance. Variable Schedule needs to be turned in by the 20th for the next month of care.	
	<input type="checkbox"/> \$40/day (Hot Lunch Included)	<input type="checkbox"/> \$38/day (No Lunch Included)
<input type="checkbox"/> Check here if your child has completed their Early Childhood Health & Developmental Screening.		

School Age Care Schedule (entering grades K - 6)			
<b>Student Name:</b>	<b>Start Date:</b>		
<b>Student Name:</b>	<b>Start Date:</b>		
Care Schedule	Before School   6:00-8:00a	After School   3:00-4:30p	After School   3:00-6:00p
<input type="checkbox"/> Set Schedule 2 day minimum/wk	M T W Th F \$8.50/day	M T W Th F \$10.50/day	M T W Th F \$14.50/day
<input type="checkbox"/> Variable Schedule 6 day minimum/mo	6 days will be billed for each month regardless of attendance. Variable Schedule needs to be turned in by the 20th for the next month of care.		
	<input type="checkbox"/> \$8.50/day   Before School	<input type="checkbox"/> \$10.50/day   After School, 4:30p	
	<input type="checkbox"/> \$14.50/day   After School, 6:00p		
<b>Notes on School Age registration (grades K - 6):</b>			
<ul style="list-style-type: none"> <li>You may only choose ONE after school option. Split times will not be honored.</li> <li>Break Day rates (days when school is not in session) will be \$38/day when registered.</li> <li>Families can only have one pick-up location and one drop-off location (these can be different). This will impact you if your child attends TKC part-time because you will not be able to have them bussed to/from home on days when they do not attend TKC. There are no bus passes allowed. Please ask for details.</li> </ul>			

## Registration Fee:

An annual registration fee of \$25/child or \$35/family is due at time of registration. {If you have already paid this for Summer 2017, you do not owe this fee again.}

## In signing this contract, I understand and agree to the following:

- I must enter the building and sign my child(ren) in and out on the attendance sheet each day. I will make contact with a site staff person before I leave with my child(ren.) Late pickup fees will apply when children are picked up after 6 pm.
- Past due accounts will be sent to a collection agency and children will be excused from the program.
- It is my responsibility to provide and keep a current list of emergency phone numbers to TKC staff.
- I give permission for my child(ren) to leave the school premises under proper supervision for walks, in town outings, the public library or field trips in an authorized vehicle (school bus or van).
- My child can be included in pictures and publicity connected with the Tiger Kids Club program and Delano Community Education programs.
- Tiger Kids Club staff may exchange information with school staff and district personnel working with my child(ren).
- My email will be provided to staff and the Parent Advisory Board.
- I will notify Tiger Kids Club staff of any changes in family information or schedule changes for my child(ren).
- A copy of the parent handbook is available online. I agree to reference this information and understand the policies and procedures which are to be followed while enrolled in the program.
- Every effort will be made to contact parents through work, home and emergency phone numbers. If it is necessary, a physician or ambulance may be contacted at my expense if the staff feels it is necessary.
- The schedule I have selected will remain in effect the entire session.
- There is a 2 week notice required to withdraw from the program. Also, there is a 1 week notice required prior to starting. All notices must be made in writing.

## Party Responsible for Payment on Account

BOTH PARTIES MUST SIGN THE CONTRACT IF PAYMENT IS SPLIT.

Parent/Guardian \_\_\_\_\_

County Assistance \_\_\_\_\_

If two parties are paying for childcare, please explain the arrangements \_\_\_\_\_

## Communications Preference

Which parent/guardian would like to:

Select one or both.

Parent/Guardian #1

Parent/Guardian #2

1. Be contacted first for illness/emergency?

2. Receive billing communications?

## Acknowledgement

I hereby agree to release Independent School District #879, Delano Public Schools, Delano Community Education and Services and all of its employees from any liability related to accidents or injuries that may occur during the Tiger Kids Club program. In the event of an emergency, I give my permission to Tiger Kids Club staff to secure medical help, including the services of a rescue squad or emergency room of the nearest health facility. I understand that I will be held responsible for all medical expenses.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

(Two signatures only necessary if payment is split.)

I am interested in joining the TKC Parent Advisory Board and would like more information.



# TIGER KIDS CLUB CHILDCARE

## 2017 - 2018 FAMILY INFORMATION FORM

BS  
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### Family Information

**Parent/  
Guardian  
#1**

Parent/Guardian \_\_\_\_\_  
 Address \_\_\_\_\_ City/Zip \_\_\_\_\_  
 Email \_\_\_\_\_  
 Home Tel \_\_\_\_\_ Work Tel \_\_\_\_\_ Cell \_\_\_\_\_

**Parent/  
Guardian  
#2**

Parent/Guardian \_\_\_\_\_  
 Address \_\_\_\_\_ City/Zip \_\_\_\_\_  
 Email \_\_\_\_\_  
 Home Tel \_\_\_\_\_ Work Tel \_\_\_\_\_ Cell \_\_\_\_\_

### Child Information

*For more detailed health concerns/allergies/diet restrictions, or for medications, please see office personnel for a **Medical Permissions Form**. If your child has an IEP, we request that a copy be given to the coordinator.*

Child Name	Date of Birth	2017-18 Grade	T-Shirt Size				
1. _____ male/female	_____	_____	XS	S	M	L	XL
Health concerns/allergies/diet restrictions:	Does your child have an IEP? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, briefly describe:						
2. _____ male/female	_____	_____	XS	S	M	L	XL
Health concerns/allergies/diet restrictions:	Does your child have an IEP? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, briefly describe:						
3. _____ male/female	_____	_____	XS	S	M	L	XL
Health concerns/allergies/diet restrictions:	Does your child have an IEP? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, briefly describe:						

### Emergency Pick-up

*Authorized people to pick up my child (other than parents) in case of emergency/ alternate scheduling. Please list in order of contact for emergencies. **Must have at least TWO listed.***

Name(s) #1 \_\_\_\_\_ Phone \_\_\_\_\_  
 Name(s) #2 \_\_\_\_\_ Phone \_\_\_\_\_  
 Name(s) #3 \_\_\_\_\_ Phone \_\_\_\_\_  
 Name(s) #4 \_\_\_\_\_ Phone \_\_\_\_\_

### Not Authorized

*Persons not authorized to pick-up my child at any time - TKC staff should be aware of these people in relation to my child.*

Name(s) & relationship to student: \_\_\_\_\_

### Acknowledgement

*I understand that this information will be used for Summer 2017 and/or School Year 2017-18. It is my responsibility notify Tiger Kids Club in the event that any information provided on this sheet changes through June of 2018. If many changes occur, it may be necessary to fill out a new form.*

**Parent Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Parent Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*(Two signatures only necessary if payment is split.)*