

**IMPRESSIONABLE YEARS**  
 1041 Route 3 North, Suites 4-9  
 Gambrills, MD 21054  
 (410) 721-0544

**CONTRACT FOR CHILD CARE**

This contract is between Impressionable Years and \_\_\_\_\_  
 Parent or Guardian  
 agreeing to the terms of care for \_\_\_\_\_ Child Care  
 Child's Name  
 Begins \_\_\_\_\_.

The schedule for care shall be as follows (check all that apply):

Schedule	Monday	Tuesday	Wednesday	Thursday	Friday
Full Day					
Before School					
After School					

The fee for care shall be \_\_\_\_\_ per month payable **on the Friday before the 1<sup>st</sup> for services in advance for the upcoming month.**

Special attendance and/or fee arrangements are noted as follows: **No changes in scheduled days may be made to set schedule. Additional days may be available with permission from the office.**

The Parent(s) or guardian(s) understand(s) that the following additional fees and conditions apply:

- 1 A \$75 non-refundable application fee is payable with the receipt of an application of care. (\$100 for two or more children of the same family.)
- 2 A refundable deposit equivalent to ½ month's tuition is due upon enrollment. This deposit will be applied as you last payment to the center upon one month's written notification of your intent to disenroll after you have been at the center for more than 6 weeks. Without one months written notice, the center will keep this deposit.
- 3 No reductions in the fee for care shall be made due to child or parent illness, legal holidays or closing due to weather or other emergency conditions.
- 4 No childcare will be available for accounts not paid in full by Monday at 10:00 a.m. of the current tuition month.
- 5 If your child is not picked up by closing time, a late fee of \$15.00 for the first 15 minutes (or fraction thereof) and \$5.00 for each additional 5 minutes will be charged.
- 6 There will be a \$25.00 charge for checks returned to Impressionable Years for

non-payment.

- 7 An additional fee will be charged for childcare due to schedule or unscheduled school closings, delayed opening or early dismissals.
- 8 Personal toys should be left home.
- 9 Pacifiers are no longer given to the child at any point during the day.
- 10 Comfort items will be offered at naptime (blankets, stuffed animals, etc).

Enclosed in the packet you will find several pieces of paper for you to read and fill out. Here is a list of what is included in the packet:

- 1 Emergency card must be filled out (updated each year)
- 2 Parent Handbook
- 3 All About Me form (updated each year)
- 4 Contract for childcare
- 5 Curriculum

As a part of Impressionable Years continuing accreditation, parent participation will be required from every family. This can be done through a variety of activities and opportunities:

- |                            |                             |
|----------------------------|-----------------------------|
| Parent bulletin boards     | Classroom helpers           |
| Newsletters                | Workshops                   |
| Field Trips                | Preparing materials at home |
| Parent/teacher conferences | Story time                  |
| Computer work from home    | Attending fundraiser events |
| Web site maintenance       |                             |

All families are required to donate 10 hours to the center over the course of the school year. This will start August 2007.

Impressionable Years agrees to provide care as described in the Impressionable Years Parent Handbook. The Parents(s) or guardians(s) agree(s) to abide by the conditions and directions described in this contract and in the Impressionable Years Parent Handbook.

This contract shall remain in force until superseded by a later contract, or until either Impressionable Years or the parent(s) or guardian(s) give(s) two week written notice of intention to terminate this care agreement.

**I HAVE READ THIS CONTRACT AND I UNDERSTAND AND AGREE TO THE CONDITIONS AND POLICIES OF IMPRESSIONABLE YEARS**

\_\_\_\_\_  
parent or guardian signature

\_\_\_\_\_  
date

\_\_\_\_\_  
parent or guardian signature

\_\_\_\_\_  
date

**AGREED**

\_\_\_\_\_  
Administrator signature

\_\_\_\_\_  
date

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For office use only:

App fee: \$\_\_\_\_\_ Date received: \_\_\_\_\_ Ck#: \_\_\_\_\_ Waived? \_\_\_\_\_  
Initials

Deposit: \$\_\_\_\_\_ Date received: \_\_\_\_\_ Ck#: \_\_\_\_\_ Waived? \_\_\_\_\_  
Initials

Notes: \_\_\_\_\_

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