

Noah's Ark Rates

Annual Enrollment fee - 1st child - \$60.00; 2nd child - \$40.00; 3rd child - \$30.00

Drop-in Enrollment fee - \$35.00

Age group	Full-time Weekly (up to 45 hrs) Addl hrs + \$4.00/hr	Part-time Weekly (up to 20 hrs)	Drop-in rates If less than 48 hrs notice	Drop-in rates If less than 24 hrs notice	Extra hrs (Same Day Drop-in)
0-12m	\$ 175.00	\$ 120.00 + 5.50 / hr	\$ 7.00	\$ 8.00	\$9.00
1-2 years	\$ 170.00	\$ 115.00 + 5.50 / hr	\$ 7.00	\$ 8.00	\$9.00
2-3 years	\$ 160.00	\$ 110.00 + 5.00 / hr	\$ 6.50	\$ 7.50	\$8.50
3-4 years	\$ 135.00	\$ 90.00 + 4.50 hr	\$ 6.00	\$ 7.00	\$8.00
4-5 years	\$ 130.00	\$ 85.00 + 4.50 / hr	\$ 6.00	\$ 7.00	\$8.00
5-6 years	\$ 125.00	\$ 80.00 + 4.00 /hr	\$ 5.50	\$ 6.50	\$7.50
6+ years	\$ 120.00	\$ 75.00 + 4.00 / hr	\$ 5.50	\$ 6.50	\$7.50

- F/T , P/T rates applies to schedules given with at least 48 hrs notice. The 48 hrs rule applies to our office hours, which is Monday thru Friday 8:00am – 5:00pm.
- For night hours (9:00pm – 6:00am) there is an additional charge of \$2.50/hr per child
- There is an additional charge of \$2.50 per hr / per child for Sundays
- We give discount for older siblings (full-time, part-time only) - 10%-2nd child, 15% -the oldest
- We charge \$.50/ml for transporting child (ren) to and from school (round trip)
- We charge \$5.00 if your child was not at designated place at the school pick-up time
- **All drop-in fees required at the time of service**

I agree to pay Noah's Ark Learning Center, LLC non-refundable registration fee of \$_____.

My tuition is \$_____ every _____ based on my schedule: F/T P/T

Days and Hours

Parent or guardian Signature

Date

Statement of responsibility

I further understand and agree that in operating this childcare facility and caring for my child, Noah's Ark, LLC shall be responsible for acting in a reasonable manner and in compliance with the legal requirements of the State of Idaho (the Standard of Care). However, I also understand that Noah's Ark, LLC is not a guarantor of my child's safety and that the risk of accidents or injury to my child cannot be completely eliminated even when Noah's Ark, LLC has satisfied the Standard of Care. I will not sue and will indemnify Noah's Ark against liability for accident or injury to my child occurring under all other circumstances.

Parent or guardian

Date

Registration Requirements - (please, initial)

For child(ren) to be enrolled and put on schedule, we require the following:

1. Admission Agreement - signed and dated
2. Child(ren)s Personal Information Form
3. Medical Statement for ANY food substitutions
4. Up to date **Immunizations Records**
5. Registration Fee(s) and the 1st week tuition
6. For parents receiving ICCP we require a letter from ICCP as proof of eligibility, registration fee and parent's portion is to be paid at the time of enrollment. If parents prefer to start immediately, they are to pay weekly until we receive ICCP letter as a confirmation
7. The parents or guardians shall attend an Orientation
8. Whenever in this agreement we use the term "parents" it means "**A parent, guardian or designated representative of the child's parents or guardians**" _____

Attendance Policy– (Please initial at every point)

1. The parents shall notify the center of any changes in their schedule at least 48 hrs in advance during office hours (Monday-Friday 8am to 5 pm) or charged accordingly (hourly fee). _____
2. If parents brought child (ren) without a notification they will be charged \$15.00/hr – first hour, same day drop-in rate after that. _____
3. The parents shall notify the center when the child is going to be absent from the childcare every day that the child is absent _____
4. If a 3 year old child is not fully potty trained and therefore can't start attending Preschool 1 class, he/she can remain in Toddler 2 class only for up to 3 more months. _____

Arrival / Pick-up Time Policy– (Please initial at every point)

1. At the arrival time the parents shall sign in (**time and initials**) on the attendance roster, **bring the child to the classroom**, wait for a child's well-being check-up, and only then leave the premises _____
2. The parents shall notify their child's teacher about any cuts, bruises, or other body markings that is present at the drop-in time _____
3. The parents shall notify their child's teacher if in the last 24 hours their child was not feeling like him/herself or had any symptoms listed in the "Illness policy" _____
4. The parents shall check their child's cubby to make sure that there is **at least** 1 change of clothes (2-3 if child is NOT fully potty-trained) _____
5. If your child is brought to the classroom before scheduled time (without prior notification), or picked up from the classroom more than 5 min later than the scheduled time (without prior notification), an early or late fee of **\$5.00 for every 15 min** will be charged. _____
6. The parents shall check their child's cubby at the pick-up time for anything that needs to be taken home (art projects, other papers or reports, etc) _____
7. The parents shall sign the child out (after picking up a child from classroom) (**time and initials**) on the attendance roster before taking their child from the premises (no later than 5 min after the scheduled pick-up time). _____
8. Failure to complete child sign in and out procedure (**time and initials**) will result in a \$4.00 charge per child per occurrence. _____
9. The parents shall notify the center in writing when someone other than those named on the emergency pick-up information will be picking up their child. _____
10. Failure to pick-up your child after 2 hours of non-notification will result in contacting proper authorities and placing your child into protective service. _____

Communicating with Staff- (Please initial at every point)

1. It is NOT our teachers responsibility to handle any office procedures . The parents should make arrangement with the office to discuss any questions about billing, fees, schedule changes or food substitutions _____
2. The parents shall come to the center for conferences when asked to do so by a member of the center’s staff. _____
3. The parents or guardians shall remain calm and respectful toward any staff members at all times _____

Obligations of parents or guardians - (please, initial every point)

1. The parents shall see that the child is dressed according to weather conditions when brought to the center, following the guidelines in the Parent Handbook. _____
2. The parents shall provide the child with a small blanket and small pillow (which needs to be taken home every Friday and washed) to use during nap time. _____
3. The parents shall provide all other necessary items in a timely manner (formula, diapers, etc)._____
4. If extra clothes are not available, you will be called to bring clothes or pick-up your child within 1 hr. A charge for all the items that the center provided will be added to your weekly bill_____
5. We do not allow toys from home (only exception - Show and Tell Time). The center shall not be responsible for lost or broken toys brought from home_____
6. The parents shall respect the Christian nature of our center and its staff (we do not allow death, ghosts, witches, monsters, etc paraphernalia or clothes). _____
7. The parents will timely notify center of any changes in contact information (address, phone numbers, etc) _____

Parent or guardian

Date

Billing / Payment Policy – (Please initial at every point)

1. Payment obligation is based upon the block of time you agreed to use childcare, not the actual hours of attendance. Fees will be charged for all days in which childcare is in operation and your child is scheduled to attend. _____
2. Tuition is figured as a weekly fee. It is to be paid weekly, biweekly or monthly no later than the Sunday of the current week. Any other payment arrangements for special circumstances must be approved in advance and set up in writing. _____
3. **10 %** late payment fee will be charged on Monday, following the unpaid for week. _____
4. All checks issued with insufficient funds will be charged a **\$30.00 fee** and future payments have to be made by debit / credit cards or cash or money-orders only. _____
5. If tuition is not paid for 2 consecutive weeks or the balance is greater than \$250.00, **children will be taken off schedule** until tuition obligations are met (including the late payment fees). _____
6. If balance (including late payment fees) are not paid within 30 calendar days, the child(ren) will be disenrolled and a delinquent account will be turned over to a collection agency for collection. _____
7. Parent(s) participating in the ICCP must pay their copayment by the 7th of the current month. If it's not paid by the 15th, the late payment fee of 10% of the remaining family balance will be added every week until payment is made. If copayment is not made by the end of the month, the child(ren) will be taken off schedule until payment is made _____

Holiday Closures- (please, initial)

We will be closed for the following holidays: New Years Eve & Day - 3 days, Easter weekend, Memorial Day - 3 days, 4th of July - 3 days, Labor Day - 3 days, Thanksgiving Day, Christmas holiday - 3 days. You will not be charged for planned holiday closures _____.

Illness Policy– (Please initial at every point)

1. The parents shall NOT bring a child to the center if in the last 24 hours child had:
 - a fever of 100 degrees or higher
 - diarrhea, or vomiting
 - any rash (especially with fever)
 - pink or red looking eye with white or yellow discharge
 - greenish discharge when sneezing,
 - Head lice or nits, until after the first treatment or letter from a doctor

2. If the child will start having any symptoms from the list above OR _____
 - if the child cannot participate in normal activities in his/her classroom
 - if the child develops mouth sores
 - if a child has an abdominal pain that continues for more than 2 hours, even if it is intermittent
 - if a child has a severe cough or difficulty breathing (rapid or wheezing)
 - if the child requires a greater level of care that we can provide without compromising the health and safety of other children

The parents shall pick-up ill child **within 1 hr** after phone notification. _____

An ill child shall be isolated from other kids and given appropriate care until child is picked up by a parent
3. If the child was excluded from the child care center, he / she will be allowed to return to the center if:
 - a) parents bring a note from a doctor, stating that child may return to a social setting OR
 - b) full 24 hours has passed since the last symptom that was the cause of exclusion _____
4. The parents shall notify the center of the child’s possible exposure to a communicable disease.

Injury policy- (please, initial)

The center shall give appropriate first aid to hurt children. A parent shall be contacted if it is the judgment of the staff that immediate medical attention is necessary. If the injury requires immediate emergency care, 911 will be called, and then parents will be contacted. Any medical, dental or hospital bills is the responsibility of the parents _____

Medication Policy– (Please initial)

The parents shall bring physician-prescribed medication only in original pharmacy bottle or package, fill out Medication Form completely for every day that medication needs to be administered. The center shall have no responsibility for any adverse reaction caused by the administration of such prescribed medication. _____

Policy for Drop-in care– (Please initial at every point)

1. Drop-in care can be scheduled based upon staff ratio and availability (if there is no unpaid balance for previous times of care). Minimum scheduled time is at least 1 hour. All drop-in charges should be paid at the time of scheduling. _____
2. If parents choose to cancel already scheduled care, with more than 24 hours notice they will be charged 50% of total charges; with less than 24 hours notice they will be charged 100% of total charges. _____

Discipline Policy

The child shall be taught and guided toward the appropriate behavior. Teachers will give instructions or expectations for every activity

Some basic rules that the children will be asked to follow in this day care are:

- No Hitting, No Pushing, No Biting, No Name Calling,
- Respect the Property and Feelings of Other Children

- No Running or Loud Voices Indoors (use soft voice)

- No Fighting, Play Shooting, or Sword Play, No Rough-Housing

If a child makes a wrong choice, the following steps will be taken:

- A verbal warning
- Time-out
- Discipline policy
- Office time-out
- Call to parent to help calm the child
- Call to parent to pick-up child, if child is not picked-up within 45 min, he/she will be taken off schedule next day.
- If child has to be picked-up second time from office - he/she will be taken off schedule next day.
- If child has to be picked-up third time from office - he/she will be taken off schedule for 3 days. (Parent - office conference to take place before child can come back to center).

We reserve a right to not follow this procedure if a child is in danger of hurting him/herself, other children or teachers; uncontrollable outburst of anger or rage, OR his/hers behavior is negatively affecting other kids.

Parent or guardian

Date

Termination of the agreement – (Please initial at every point)

This agreement shall be terminated if any one or more of the following occur:

1. Parents give a 2 weeks written notice. If notice is not given, the parents are responsible for the last two weeks tuition, even if child is not attending. _____
2. The parents allow their account to become delinquent. _____
3. Failure of the parents or guardians to honor the obligations listed in this agreement or in any rules, regulations, or manuals promulgated or provided by the center. _____
4. The center in its sole and unfettered discretion determines that it is unable to meet the needs of the child. _____
5. The center in its sole and unfettered discretion determines that it is not in the best interest of the program or other children enrolled at the center to have the child in attendance. _____
6. If child was not in attendance for one FULL CALENDAR MONTH. _____

Severe Weather Closure / Emergency Evacuation Plan

In the event of severe weather or snow, we will delay opening until travel is safe or remain closed for an entire day. If that happens, we will notify families through our Facebook page (Noah's Ark Learning Center) and local news channels. _____

Child Abuse & Neglect Policy- (please, initial every point)

- 1. A parent shall see that the child comes to the center in good hygiene (tidy appearance and clean clothes) _____
- 4. The director or any other staff members shall report to Children’s Protective Services or the Police Department **as required by the licensing regulations** any suspicion of child abuse (sexual, physical physiological or emotional) , neglect, or endangerment of which they may become aware.

Modification clause

This agreement may be modified whenever any of the circumstances covered by this agreement changes. Such modification may only be made in writing and must be signed and dated by the parties involved in order to be binding and effective. Oral modifications are not binding under this agreement and shall not be enforceable under any condition.

Signatures to agreement

I agree to cooperate with the general policies of the center; to perform the obligations of the parents or guardians set forth in this agreement; and to abide by the rules, regulations, and manuals promulgated and provided by the center. My signature below indicates that I have read the terms of the agreement and the rules, regulations, and manuals promulgated and provided by the center. It further indicates that I have this material explained to me and that all my questions have been satisfactory answered.

_____	_____
Parent or guardian	Date
_____	_____
Parent or guardian	Date
_____	_____
Director	Date

The U.S Department of Agriculture prohibits discrimination against its customers, employees, and applicants for employment on the bases of race, color, national origin, age, disability, sex, gender identity, religion, reprisal, and where applicable, political beliefs, marital status, familial or parental status, sexual orientation, or all or part of an individual’s income is derived from any public assistance program, or protected genetic information in employment or in any program or activity conducted or funded by the Department.

(Not all prohibited bases will apply to all programs and/or employment activities.)

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Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339; or (800) 845-6136 (Spanish).
USDA is an equal opportunity provider and employer.

Child(ren)s Name(s) _____

Week of _____ **Payment** _____ **For** _____ **hrs**

Mon Tues Wed Thru Fri Sat Sun

Arrival _____

Departure _____

Week of _____ **Payment** _____ **For** _____ **hrs**

Mon Tues Wed Thru Fri Sat Sun

Arrival _____

Departure _____

Week of _____ **Payment** _____ **For** _____ **hrs**

Mon Tues Wed Thru Fri Sat Sun

Arrival _____

Departure _____

Week of _____ **Payment** _____ **For** _____ **hrs**

Mon Tues Wed Thru Fri Sat Sun

Arrival _____

Departure _____

Week of _____ **Payment** _____ **For** _____ **hrs**

Mon Tues Wed Thru Fri Sat Sun

Arrival _____

Departure _____

Week of _____ **Payment** _____ **For** _____ **hrs**

Mon Tues Wed Thru Fri Sat Sun

Arrival _____ _____ _____ _____ _____ _____

Departure _____ _____ _____ _____ _____ _____