PIPESTONE COUNTY FAMILY SERVICES
CHILD CARE AGREEMENT FORM

1) If you are applying for Child Care Assistance through Pipestone County Family Services, in order to obtain strict confidentiality, **parent/guardian must meet with Karen** at the Rec Department to register your child for this program and complete the necessary paperwork.

2) **All fees for the program will be due up front** until **written final approval** of your acceptance into the program has been received from Family Services or any other entity you are working with.

3) **Hourly Rate:** $4.00 – Family Services will pay **$2.45 of this amount only!** It is **your responsibility** to pay the **remaining fee per hour** if applicable. **All fees not paid by Family Services will be your responsibility!** Fees differ depending on your situation.

AFTER SCHOOL PROGRAM

MONTHLY:$100 – **1st CHILD** $85 Each – **2 OR MORE CHILDREN**
HOURLY: $4.00/Hr (Minimum 1.5 Hours)
Teacher Inservice Days: ½ DAY: $15.00) **FULL DAY:** $25.00

3) We require a **$50.00 Deposit Fee Paid Up Front** for the After School Program.This fee will be returned to you at the end of program if all fees have been paid on your account.

4) **Co-Pays must be received every two weeks prior to your child's participation in the program.** If co-pays or any other related fees are not received by the due date, **a $5.00 LATE FEE** will be assessed. You will be notified that your child cannot attend the program. Family Services will be notified immediately.

5) Transportation fees for any extra special events or trips **will not be paid by Family Services.**

6) It is your responsibility to make sure your application for child care to Family Services is **up-to-date** at all times. Any fees that are owed due to a lapse in coverage from Family Services will be your responsibility.

7) **All fees not paid by Family Services will be your responsibility.**

8) Family Services **will be notified** if terms listed above are not met. Your child will not be allowed to continue in the After School /Summertime Fun Program until all fees and matters are resolved.

I agree to all terms listed above regarding child care provided by Pipestone County Family Services.

CHILD'S NAME_____

GRADE 2019/2020_____ **BIRTH DATE**_____

Family Services Contact Person_____ **PHONE** _____

PARENT E-MAIL (Print)_____

PARENT (PRINT NAME)_____

_____ **DATE**_____
PARENT/GUARDIAN SIGNATURE