GUARDIAN AGREEMENTS & STATEMENTS OF UNDERSTANDING

By signing, I agree to the following:

- 1. As the parent/guardian of a child enrolled in the QCARE program, I shall be able to visit my child's school age site unannounced, at any time while my child is receiving care, unless in times where protocol changes (Covid-19 for example)
- 2. I understand that the Parent/Guardian Handbook that explains my rights and responsibilities is available for viewing (including updates) at <u>www.quincyafterschool.org</u> or I can obtain a copy by requesting one at the QCARE main office. I agree to abide by the policies and procedures of QCARE as outlined in the Contract and those policies and procedures outlined in the Handbook, as well as policies required by EEC.
- 3. I have read and understand the QCARE Parent/Child Behavior Contract outlined in the Parent/Guardian Handbook.
- 4. I understand that my child can be terminated from care for inappropriate behavior by my child, by me, or by friends or family members of mine.
- 5. If my child will not be attending the program on a given day, I will notify the childcare site on that day of my child's absence **no later than 10:00am** ("call-out" time for vacation programs is 8:45am or earlier).
- 6. I agree to adhere to the health and safety guidelines, including any supplemental guidelines such as Covid-19 protocol.
- 7. I agree to review/update and re-sign the file to revalidate the information in the Child Application before expiration of the file.
- 8. I will provide all necessary medical information, medications, and required paperwork documentation in accordance with QCARE's policies and Department of Early Education and Care regulations prior to my child attending care. I will keep all medical information, medications and forms up to date and will notify QCARE of any changes. I understand that failure to comply with these requirements may result in QCARE becoming unable to provide childcare services.
- 9. I agree that my child will participate in all QCARE sponsored events and activities totally at their own risk for injuries. I hereby release Quincy After School Child Care, Inc., and all others acting on their behalf, from any legal liability or legal action for any injuries that may occur.
- 10. I understand that I am responsible for payment of all medical related costs associated with injuries that might occur at the Quincy After School program.
- 11. I understand that my child will not be allowed to leave QCARE with an unauthorized person. All persons authorized to pick-up my child must be listed on the authorized pick up/emergency contact list (or approved in advance by the parent/guardian) and have a valid driver's license or picture ID with them at the time of pick-up, and *must be at least 18 years old or older* and *must sign the child out of care.* (*sibling exemption detailed in the parent/guardian handbook*).
- 12. I understand that if a person arrives at the program to pick-up my child and appears to be under the influence of drugs or alcohol, that for the child's safety, Quincy After School employees will refuse release and may contact an alternative authorized pick-up and/or the police or other authorities.
- 13. I understand that every attempt will be made to shield participants from public photographs and/or video recordings when at public venues, but due to the public nature of field trips or outings Quincy After School Child Care, Inc. cannot guarantee that your child's likeness will not be captured while in public.
- 14. I understand that for the child's safety a photograph of my child will be added to his/her file upon entering the program each year.
- 15. To best support the needs of the program and all children in care, I grant permission for my child to be generally observed by QCARE staff or consultants while they are participating in the program, and for consultants to then provide feedback to the teaching and administrative staff.
- 16. I have read and understand QCARE's plan for restroom supervision, as stated below: QCARE feels that in order to best provide for child safety as well as a child's right to privacy, QCARE will utilize the "bathroom buddies" system for all children in care. The bathroom buddies will be same gender children to travel to facilities with, and act as helpers if one of the children needs to get adult assistance while in the restroom. All children must notify a staff member when they are leaving the program space to utilize the restroom. For children who are under seven years old, and for other children with special circumstances agreed upon by the parent/guardian, a staff member will accompany the bathroom buddies to the restroom area to best provide supervision and respond immediately to any emergency situation that could arise. For facilities that are available to the general public, QCARE staff will provide constant supervision. This plan is in accordance with EEC regulation 7.10(5)(b)&(j).

Parent Signature _____

Date Signed _____

PARENT/GUARDIAN CONTRACT WITH QUINCY AFTER SCHOOL CHILD CARE, INC.

I **«Parents_Name**», as the parent/guardian of **«Childs_Name**», an enrolling my child in the Quincy After School Child Care program at the **«Site**» site starting on **«Start_Date**». The weekly tuition payment amount I agree to pay is **«Total_Tuition**» per week for the following care program hours:

Monday Hours	Tuesday Hours	Wednesday Hours	Thursday Hours	Friday Hours
«Monday_Hours»	«Tuesday_Hours»	«Wednesday_Hours»	«Thursday_Hours»	«Friday_Hours»

READ THE FOLLOWING CAREFULLY, AS YOU ARE SIGNING A CONTRACT FOR CHILD CARE SERVICES WITH QCARE. PARENTS/GUARDIANS ARE RESPONSIBLE FOR ALL ASPECTS OF THIS CONTRACT.

- □ I understand that this contract constitutes an agreement between my family and Quincy After School to utilize care until the last day of school. This includes any days added onto the school year due to school cancellations. I understand that additional tuition will be required for school make-up days, unless I give a three-week notice as explained below.
- Complete or review a child information application with all the pertinent details relating to my child, <u>updating information as</u> <u>necessary throughout the year</u>, and including information relevant to my child's safety.
- Attend a registration session with a QCARE representative, as necessary, to discuss the needs of my child/family, review policies and procedures of the QCARE program and/or those required by the Department of Early Education and Care.
- Pay a <u>non-refundable registration fee of \$75.00</u> before my child can begin the program for each year that my child is enrolled with QCARE. I agree to enter the account information that will be used for my bi-weekly automatic transfer of funds, as a last step in the online registration process of my child(ren).
- □ I recognize that the EFT service provider will assess fees based on failed ACH payments or late payments from my account. *please reference EFT service provider material for a listing of fees.
- □ <u>I understand that all failed EFT transfers (non-payment) or bounced checks will result in a service fee of \$30.00.</u>
- □ I understand that pick-up time is by 5:30pm each night. <u>I understand that I will be charged \$2.00 per minute after</u> 5:30pm, which will be added to my account and withdrawn at least monthly from my EFT transfer.
- I understand that I am obligated to pay for holidays when the schools and QCARE are closed and for all days that the schools and QCARE are closed due to inclement weather or other emergencies.
- I understand that I am obligated to pay tuition if my child is sick, injured, on vacation, planned and unplanned absences, travel and mandated guarantine.
- I understand that any forced closures by the Federal, State, and/or local authorities including QPS, tuition will still be charged at 35% of my child(s) daily rate starting with the first day of closure. A three-week notice is required to drop from any program.
- I understand that I am not obligated to pay for school vacation weeks, unless I sign up for the vacation programs.
- I understand that a space is reserved for my child and that the slot cannot be used by any other family on a day-to-day basis. Therefore, I am obligated to pay for family-scheduled vacations and when my child is not in child care on a scheduled day when QCARE is open.
- I understand that a three-week notice is required to be given at the main office for any changes I make in my child(s) schedule including termination from the program. I understand that I will be assessed a \$10.00 service fee for each change in schedule. I understand the QCARE Summer Program change fees are different than school year. I understand that I am financially obligated to pay for the three weeks of care directly following my notice of termination from the program.
- Voucher payments are required to be kept current, a week in advance of services rendered, at all times. In place of a service fee for late payments, childcare services may be terminated and my child care space may be forfeited due to late payments associated with my voucher. I understand that I am responsible for keeping my voucher current.
- □ I understand that if <u>I fall behind on tuition payments and do not arrange a payment plan with the administration of QCARE,</u> <u>my childcare services will be immediately terminated</u>. This action will not terminate my obligation to pay the amount owed.
- I understand that payment is due in full the Friday before the week of care has been utilized. A late fee of \$15 per week can be charged if I do not pay the Friday before my child attends the program for each and every week of the year that I am late with my tuition payments.
- □ I understand that I will be responsible for court and/or collections fees if I fail to fulfill my financial obligations to Quincy After School Child Care.
- I agree to hold QCARE harmless for any and all inherent risks due to COVID-19 in receiving care at our child's site.

Parent Signature _____

Date Signed _____