



YMCA  
We build strong kids,  
strong families, strong communities.

# YMCA@RCC Child Development Center

## Agency Parent Payment Contract

2009 - 2010 Calendar Year

Parent's Name: \_\_\_\_\_ Child's Name: \_\_\_\_\_

Address: \_\_\_\_\_ Phone# \_\_\_\_\_

The following are the AFS/DPU rates with the exception of the hourly rates. Those are slightly higher than the AFS standard rate for our area.

- Please check the hours you would like to contract for.
- |                                     |                  |                                       |                 |   |                 |
|-------------------------------------|------------------|---------------------------------------|-----------------|---|-----------------|
| <input type="checkbox"/> Full-Time  | 136+ hrs/month   | <input type="checkbox"/> Toddler Rate | \$539.00 per mo | <input type="checkbox"/> Preschool Rate | \$395.00 per mo |
| <input type="checkbox"/> Part-Time  | 63-135 hrs/month |                                       | \$404.00 per mo |   | \$296.00 per mo |
| <input type="checkbox"/> Occasional | 24-62 hrs/month  |                                       | \$4.50 per hour |   | \$3.50 per hour |

Starting Date: \_\_\_\_\_ Ending Date: \_\_\_\_\_

	Monday		Tuesday		Wednesday		Thursday		Friday		
Times	In	Out	In	Out	In	Out	In	Out	In	Out	
Times	In	Out	In	Out	In	Out	In	Out	In	Out	
Times	In	Out	In	Out	In	Out	In	Out	In	Out	
Times	In	Out	In	Out	In	Out	In	Out	In	Out	
Times	In	Out	In	Out	In	Out	In	Out	In	Out	
Times	In	Out	In	Out	In	Out	In	Out	In	Out	<input type="text"/> Total monthly

Hours

Monthly contract hours are rounded up to the next whole number.

Center hours are: Monday thru Friday 7:30am to 5:30pm

Co-Payment \$ \_\_\_\_\_

\*Any charges above and beyond what the agency agrees to pay will be the responsibility of the parent/guardian.

Parent/Guardian Signature \_\_\_\_\_ Social Security # \_\_\_\_\_ Date \_\_\_\_\_

Agency Case Worker Signature \_\_\_\_\_ Case Worker # \_\_\_\_\_ Date \_\_\_\_\_

ZKJ00011-CNT

YMCA Site Director Signature \_\_\_\_\_ Provider # \_\_\_\_\_ Date \_\_\_\_\_

Grants Pass Family YMCA \* PO Box 5439 \* 1000 Redwood Ave. \* Grants Pass, OR. 97527

Phone: (541) 956-7011 \* Fax: (541) 474-0087



YMCA

We build strong kids,  
strong families, strong communities.

# YMCA@RCC Child Development Center

## Student Parent Payment Contract

### 2009 - 2010 Calendar Year

Parent's Name: \_\_\_\_\_ Child's Name: \_\_\_\_\_

Address: \_\_\_\_\_ Phone#: \_\_\_\_\_

Please check the hours you would like to contract for.  Toddler Rate  Preschool Rate  
 Full-Time 24+ hours/week \$3.50 per hour \$2.50 per hour  
 Part-Time 15-23 hours/week \$4.00 per hour \$3.00 per hour  
 Occasional 5-14 hours/week \$4.50 per hour \$3.50 per hour

Starting Date: \_\_\_\_\_ Ending Date: \_\_\_\_\_

Times	Monday		Tuesday		Wednesday		Thursday		Friday		Total Term Hrs
	In	Out	In	Out	In	Out	In	Out	In	Out	
Daily Totals											

Will your child be using the facility before or beyond the college term? Yes No

Extended or Alternate Schedule: \*Availability based on enrollment number.

Times	Monday		Tuesday		Wednesday		Thursday		Friday		Total Term Hrs
	In	Out	In	Out	In	Out	In	Out	In	Out	
Daily Totals											

\_\_\_\_\_ X \_\_\_\_\_ + \_\_\_\_\_ - \_\_\_\_\_ = \_\_\_\_\_ X \$ \_\_\_\_\_ = \$ \_\_\_\_\_

# wks x wkly Hrs + Extra Week(s) Hrs - Holiday Hrs = Total Contracted Hours X Rate = Contracted Price

\$ \_\_\_\_\_ divided by # \_\_\_\_\_ payments = \$ \_\_\_\_\_ monthly payment amount

According to the above hours I agree to pay the following contracted price of \$ \_\_\_\_\_ per term to be paid in full or payments of \$ \_\_\_\_\_ by the 5<sup>th</sup> of each month. I understand that if payment or payment arrangements are not made by the 15<sup>th</sup> a \$1.00 per day late fee will be charged. I understand that if no payment has been made by the 20<sup>th</sup> of the month my child will be excused from the program. I also understand that this contract can only be changed once within the first two weeks of each term.

*Center hours are: Monday thru Friday 7:30am to 5:30pm*

Parent/Guardian Signature \_\_\_\_\_ SS# \_\_\_\_\_ Date \_\_\_\_\_

YMCA Site Director Signature \_\_\_\_\_ Date \_\_\_\_\_



YMCA  
We build strong kids,  
strong families, strong communities.

## YMCA@ RCC Child Development Center

### Admission Policy

Age for admission is 24 months through 12 years. Children must be toilet trained/training. Admittance is determined by the following priorities:

Please circle the one that applies to you. 1. Students of RCC 2. Staff of RCC 3. General Community

### Financial Obligation

Every family accepted into the center must have the financial support to pay for childcare. We do accept families with AFS, Moving On, and vocational rehabilitation support.

### Childcare Costs

**A non-refundable registration fee of \$20.00 per term is due at the time of registration.**

Your hourly rate will be based on the number of hours that you have contracted for the week. Weekly contract hours are rounded up to the next whole number. We do not calculate in half hour blocks. **Payments are due in full at the beginning of the term or in payments by the 5<sup>th</sup> of every month.** If payment or payment arrangements have not been made by the 15<sup>th</sup> a \$1.00 per day late fee will be added. If no payment or payment arrangements have been made by the 20<sup>th</sup> the child will not be allowed to attend the program.

Contract Changes: Students may only make one schedule change per term & it must be received within the first two weeks of each term. Thereafter we will bill you by the most recent contract on file. There may be exceptions for working parents but you must speak with the director.

Late Fees: If you do not pick your child up by the contracted time you will be charged a late fee of \$3.50 per hour for preschoolers and \$4.50 per hour for toddlers with a 1 hour minimum, and billed by the hour thereafter. If you have not picked your child up by 5:30pm you will be charged a late fee of \$5.00 for the first 1-5 minutes and \$2.00 per minute thereafter. The clock at the center determines the amount of the late fees.

Refunds: Charges will not be refunded due to illness and/or personal holidays. You are charged for the space you contract for your child. You will not be charged for college recognized holidays and in service days.

Withdrawal: Both parties have the right to terminate this contract at anytime. You must fill out and submit a "Notice of Withdrawal" to the Director two weeks prior to the child's last day in order to receive a refund of the unused tuition. You are responsible for the payments up through those two weeks. If it is determined that we cannot meet the needs of your child, you will be given a two week notice and will only be obligated to pay for the time used.

I have read and agree to the above admission policies of the YMCA@RCC Child Development Center.

---

Parent/Guardian's Signature

Date

---

YMCA Site Director's Signature

Date

Grants Pass Family YMCA \* PO Box 5439 \* 1000 Redwood Ave. \* Grants Pass, OR. 97527

Phone: (541) 956-7011 \* Fax: (541) 474-0087