



# Early Learning Centre Kinder Club Pre-Authorized Payment Agreement

Kinder Club

Main Contact			
First Name		Last Name	
Birthdate (DD/MM/YY)		Gender:	Male    Female    Not Specified
Residency Information			
Street Address			
City		Postal Code	
Home Telephone	Cellular Telephone	Business Telephone	
Email Address			
Family Information (Family/Group Memberships Only)			
Name (Incl. last if different from above)		Gender	Birthdate (DD/MM/YY)
1.			
2.			
3.			
4.			
5.			
Emergency Contact Information			
Full Name	Relationship	Phone Number	
Payment Authorization *Note* Only one payment account may be indicated. No split payments.*			
Account Holder First Name		Account Holder Last Name	
Account Holder Address (If different from above)			
Payment Type:    Visa        Mastercard        American Express        Bank Account (Attach Account Info/Void Cheque)			
Last 4 Digits of Card: _____ Expiry: _____			
Payment Date:        All Childcare payments are withdrawn on the 1st of each month.			
Monthly Payment Amount \$	GST (if applicable) \$	Total \$	

BY SIGNING BELOW I ACKNOWLEDGE THAT I HAVE READ, UNDERSTOOD, AND AGREE TO THE TERMS AND CONDITIONS AS OUTLINED ON THE REVERSE OF THIS FORM, AND THE PAYMENT(S) AS OUTLINED ABOVE.

Signature \_\_\_\_\_ Date \_\_\_\_\_

## Child Care Services Terms and Conditions

1) This agreement is a legal and binding contract between the child care services and the parent. **Please ensure that all terms and conditions are thoroughly discussed, and clearly and accurately recorded in the agreement. A copy of this Agreement for Ser-vices is to be retained by both the parent and the child care service provider. The parent may be required to sign additional doc-umentation regarding policies of the child care service.**

2) The parent and the child care service agree that the child care services will be available for the above named children as indicat-ed on the reverse of this form. The child care service will provide alternate care when the provider or center staff is not available (including reasons of illness and vacation) during the hours indicated below unless other arrangements are agreed upon between the parent and the child care service.

St. Michael AM class 9:15 am - 11:45 am | PM class 1:00 pm - 3:30 pm  
École St. Margaret AM class 8:30 am - 11:00 am | PM class 12:30 pm - 3:00 pm  
*\*Closed Statutory holidays including Boxing Day.*

3) The parent and the child care service agree that the total child care fee shall be \$\_\_\_\_\_/month payable by the 1st day of each month. The fee may be adjusted by providing one month written notice. Non-payment of fees may be cause for immediate termination without notice. Additional fee payment arrangements: \$10 late fee for all fees not received by the 5th of the month.\$20 Non Sufficient Funds (NSF) charge for payments processed and denied by bank due to lack of funds.  
\$125 non-refundable administration fee due immediately to hold a space.

4) (Optional) The parent and the child care service agree that the following fee shall be charged for late pickup of a child: \$10 for the first 15 minutes, and \$1 for each additional minute thereafter.

5) (Optional) Either party shall give 1 day written notice during the first 5 days of care.

6) The parent and the child care service agree that this agreement may be terminated upon 1 months written notice by either the parent or the child care service. Notice shall be received by the 1st of the month. The full fee may be paid in lieu of notice.

7) The parent and the child care service agree to comply with the child care facility policies and The Child Care Regulations, 2015 as amended from time to time, a copy of which is available from the Ministry of Education. I hereby acknowledge that I am aware of the conditions stated in this agreement and agree to abide by these requirements.

In witness whereof the parties hereto have set their hand this \_\_\_\_\_ (day) of \_\_\_\_\_ (month), \_\_\_\_\_(year)  
At \_\_\_\_\_ (city) in the province of Saskatchewan.

_____	_____
Signature of Witness	Signature of Parent/Guardian
_____	_____
Signature of Witness	Signature of the Supervisor of Child Care Centre

## Before and After School Terms and Conditions

Schools out day camps are provided only on days when the entire school system is out. I agree to comply with the policies and pro-cedures as stated in the most current Parents Manual and as amended from time to time. **I have read and understood the Parents Manual available on the YMCA website.**

An administrative fee of \$50.00 applies to all applications. I understand that I must provide 30 days' notice to withdraw or change my registration status and understand that I must complete and submit the required form in order to do so. All changes will be effective for the first of the following month.

I understand that I must provide a completed registration package with this payment form. As well both child and parent are required to sign and acknowledge the contract provided in the registration package. This contract outlines further terms and condi-tions of participation in Before and After School programs and Early Learning Centre Kinder Club.