

School District of Oakfield Child Care Center Contract

I am contracting with the School District of Oakfield Child Care Center for child care services. The center will provide this service according to terms stated.

Child's name: _____

First date of attendance: _____

Hours of service: _____

Days of the week: _____

Preferred method of communication (please list email and phone number):

Yearly registration fee: \$25 for 4K and under

Yearly registration fee is payable at the time of registration, and by August 1st of each year thereafter.

All checks should be made payable to OCCC

Please call the center, 583-2648, to let us know as soon as possible if your child will not be attending due to illness or a change in plans. If you do not contract us, you may be required to pay for that day(s).

I acknowledge the fees are payable in full for scheduled days, and that payments need to be made to insure the continuation of care.

Parent/Guardian

Signature _____ Date: _____