Barbers Country Kids Daycare Center, LLC
569 Anderson County Road 2711
Tennessee Colony, Texas 75861
903-928-2348 903-948—1023
Fax: 903-928-2358

PARENT/PROVIDER PAYMENT AGREEMENT

Mr. and Mrs. or both _____, _____

For the care of Child's name/date(s) of birth

_____-_____ _____-_____

_____-_____ _____-_____

Mon._____Tues._____Wed._____Thurs._____Fri._____

The charges below are per child. A second child will compute a 10% discount for all day children.

Newborn – 17 Months	**$125.00**	**Summer Care (School Age)**	**$ 90.00**
18 Months – 35 Months	**$ 115.00**	**Before School**	**$ 45.00**
3YRS & Potty Trained – 4YRS	**$ 105.00**	**After School**	**$ 60.00**
Daily Drop In Care NB - 18 months	**$ 40.00**	**Before & After School**	**$ 75.00**
Daily Drop In Care 18 Months – Up	**$ 30.00**		

Based on your scheduled days of care, your fee will be $_____ per week.

- **Payment obligation is based on the hours you agree to use childcare, not on actual hours of attendance.**
- **You will be required to fill out our Procare Tuition Express for automated payments. Preferably section A on the form provided. A late fee of $10.00 per day will be charged for payment not received by the Monday prior to care. When fees are not current, children may not be admitted into care and normal charges will accrue while children are excluded for non-payment.**
- **In the event this account becomes delinquent; you agree to pay all costs of collection.**
- **Two weeks written notice or two weeks' pay is required before removing your child/children from childcare.**
- **Barbers Country Kids Daycare Center, LLC reserves the right to terminate this agreement with no notice for violations of childcare rules and policies listed in the parent handbook.**

I/We agree to enroll my child/children in Barbers Country Kids Daycare Center, LLC beginning on _____ I agree to the terms described in the payment agreement above. The provider may amend this agreement by giving the parent(s) a copy of the new or changed agreement at least 2 weeks before they go into effect.

Mother/legal guardian signature _____ Date_____

Father/legal guardian signature _____ Date _____

Accepted by Caregiver _____Date _____