



Licensed since 1989, License #380505849; ;
Department of Social Services: 801 Traeger Avenue, San Bruno, CA 94066; 650.266.8843

CONTRACT

Ladybug Childcare & Preschool will provide care for _____

(child's name)

placed by _____ (parent / guardian) _____ on _____ (enrollment date) _____.

FOR OFFICE USE ONLY

_____ will be cared for in the following program:
(child's name)

- Full-Day Program from 8:00 a.m. to 5:30 p.m.
- Half-Day Morning Program from 8:30 a.m. to 12:30 p.m.
- Half-Day Afternoon Program from 1:00 p.m. to 5:00 p.m.

- Mon - Fri
- Mon / Wed / Fri
- Tues / Thur



1355 Bay Street
San Francisco, CA 94123
tel 415.776.5054
(Full-Day only)

Ladybug Childcare & Preschool requires a September to August commitment from all families. In addition, two months notice is required before departure from Ladybug Childcare & Preschool. If this requirement is not met, the parent(s)/guardian(s) will be financially responsible for the two months after notice is given, even if the child is not in attendance.

Tuition will include sick days and holidays taken by the child/family as well as a two week school closure during the summer, two week closure during the winter, one week closure in the spring, all major holidays, and staff in-service days. Notice of these specific dates are given to parent(s)/guardian(s) upon enrollment of child in the Ladybugs program.

A non-refundable exit deposit in the amount of \$ _____ is required to hold a space for your child.

This deposit will be applied in full to the last month's tuition. If the provider discontinues the child for reasons other than non-payment, Ladybug Childcare & Preschool will give the parent two weeks notice.

Payment

Payment will be required on a monthly basis to be paid on the first of each month. If payment is received after the fifth of the month, a late fee of \$25.00 will be applied to the following month's statement. We also will bill you \$100 per year for field trips and art supplies and music and movement class.

A one month non-refundable deposit is required to hold the space for your child. This deposit will go towards your child's last month of attending Ladybug School.

In the event that Ladybug has to close due to Covid19, parents will be responsible for at least 50% of tuition.

Please make your check out to Ladybug School.

Should enrollment occur after the beginning of a new month, appropriate adjustments will be made regarding the first month's billing.

I agree to pay \$_____per month, to be billed monthly via email.

Meals

Ladybug Childcare & Preschool provides snacks. Please pack a lunch for your child. Please no cookies, candy, juice, etc.

Music

Our music and movement teacher, Miss Gayle, teaches a music class on every other Wednesday. During Covid19, she will be teaching via Zoom.

Pick-Up / Drop Off

My child may be taken from Ladybug Childcare & Preschool only by the following persons:

Name Relationship
Phone Number

Name Relationship
Phone Number

Name Relationship Phone Number

Please be on time to pick up your child. A late fee of \$1 per minute will be applied to your monthly statement if you are late picking up your child.

Please do not block any of the driveways along Bay Street.

Permission

I hereby give permission for my child to:

Yes No go on walks.

Yes No play on supervised park equipment.

Yes No attend field trips.

Should a dispute arise over the terms of this contract, Ladybug Childcare & Preschool agrees to participate in mediation (where a neutral party acceptable to both Ladybug Childcare & Preschools and the parent(s)/guardian(s) will assist in reaching an equitable agreement.

I have read this contract carefully and agree with full understanding of the policies of Ladybug Childcare & Preschools.

Parent/Guardian Signature Date

Parent/Guardian Print Name

Address

Email Address Phone Number

Kirsten Hove
Director _____

Date _____



Ladybug Childcare & Preschools
1355 Bay Street, #1
San Francisco, CA 94123
office tel 415.776.5054
email contact@ladybugchildcare.com
web ladybugchildcare.com

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PHOTO RELEASE

I hereby grant to Ladybug Childcare & Preschools the right to use and publish photographs of my child, or in which my child may be included, for editorial, trade and advertising without restriction; and to copyright the same.

Child's Name

Address

Parent/Guardian Signature

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SUNSCREEN UTILIZATION PERMISSION FORM

Date

Name of Child

I, (parent/guardian)_____ give my permission for staff at Ladybug Childcare & Preschool to apply a sunscreen product of SPF 15 or higher on my child, as specified below, when he or she will participate in outdoor activities. I understand that sunscreen may be applied to exposed skin, including but not limited to the tops of ears, nose, and bare shoulders, arms and legs.

Additionally, I have checked and/or indicated below my directives regarding the type and application of sunscreen:

- The staff of Ladybug Childcare & Preschool may use the sunscreen of their choice, in keeping with the applicable federal and state standards, except for the following (if specified):

- Only use the following type(s) of SPF sunscreen:_____

- For medical or other reasons, please don't apply sunscreen to the following areas of my child's body:

Print Parent / Guardian Full Name

Parent / Guardian Signature



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EVACUATION PLAN

In the event of an emergency in which it is necessary to evacuate the school, the following locations have been established as safe spaces in our neighborhood. We would report to one of the following locations based on their appropriateness and safety given the circumstances.

Listed in order of preference:

Marina Middle School
3500 Fillmore Street (at Chestnut)
phone: 415.749.3495

Great Meadows in Fort Mason (at the Senator Phillip Burton statue)
Great Meadows is the large open field in Fort Mason along Bay Street
Between Gough and Octavia Streets.

If phone lines are down, you may try Ladybug Childcare & Preschool Director, Kirsten Hove on her cell phone number, 415.971.5717

ladybug





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CONTACTS

Following are phone numbers to where you can call with questions or other important information.

Administration: 415.776.5054

This is the best number to reach Kirsten Hove.

If you need to let us know that your child will not be coming to school, or that you are running late, please call the site number.

Thank you!



Ladybug School Health Policy

In the event of an injury:

Staff will assess the injury.

- If injury is minimal, first aid will be given and an accident report completed.
- If the injury is minor, first aid will be given and parents will be notified at pick up.
- If the injury is serious, trained staff will attend to the child and call 911. Families will be contacted and one staff member will accompany the child to the hospital.

In the event of an illness:

- Runny nose
- Fever of 100
- Vomiting
- Diarrhea
- Red, swollen or discharging from eyes
- Rashes
- Irritability, unusually tired or lethargic

Children will be sent home and not to return to school for 24 hours after they have passed a normal bowel movement. If antibiotics are given to the child, the child cannot return to school for 24 hours after they have taken the antibiotic.

Hand, Foot, and Mouth: Cannot return to school until the blisters have dried.

Using gloves, hand washing, and disinfecting toys is the best way to control infectious bugs.