



Community Colleges  
of Spokane

# Child Care Programs FINANCIAL AGREEMENT

ctcLink ID 

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Child's name \_\_\_\_\_ Child's birth date \_\_\_\_\_  
(PRINT)

Parent's name \_\_\_\_\_ Last four (4) digits of Parent's SSN 

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(PRINT)

Phone (509) \_\_\_\_\_ E-mail \_\_\_\_\_

Address \_\_\_\_\_ Apt. no. \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Hours needed: From \_\_\_\_\_ To \_\_\_\_\_ Days required:  M  T  W  Th  F

CCS student:  Yes  No Campus \_\_\_\_\_ WCCC copay/month \_\_\_\_\_

Student rate/day \_\_\_\_\_ Non-student rate/day \_\_\_\_\_ Date to begin billing \_\_\_\_\_

In consideration of their mutual promises hereinafter set forth, CCS Child Care Programs (hereinafter referred to as CCS Child Care) and the parent and/or legal guardian hereby agree as follows:

**RATES** are re-evaluated annually. Rates and copay are subject to change at any time during the year and will be billed accordingly.

**CHILD CARE REGISTRATION FEE** of \$50 per child will be charged annually.

**PAYMENT** is due within **FIVE** days of issuance of your billing statement. **PRIOR TO THE DUE DATE**, a pay plan may be written by the fiscal specialist to arrange an alternate due date.

**CHILD CARE SERVICES** may be reduced if payment is not made by the next billing period.

**DELINQUENT ACCOUNTS:** CCS collection procedures will begin on accounts 30 days past due. Continued non-payment will result in the account being sent to a collection agency. All costs incurred in attempts to collect your account will be added to your past due account balance (CCS Administrative Procedure 5.10.01-C).

**REGISTRATION AND RELEASE OF TRANSCRIPTS** will be blocked by CCS if your fees are not paid in full at the end of each quarter. This prevents further attendance at CCS and the release of your transcripts until your fees are paid (CCS Administrative Procedure 5.10.01-C).

**DROPS:** You are required to give a two-week notice before your child drops from the program. You will be billed if you do not give CCS Child Care timely notice.

**LATE FEE AFTER CLOSING:** A late fee of \$1.00 per minute will be incurred by the parent or legal guardian if the child is left past closing time or past the individually contracted pick-up time and will be added to your CCS account each time it occurs.

**PAYMENT PLAN\*** (check one)  Self-pay  WCCC  DVR  Other \_\_\_\_\_

*\* If agency funding terminates at any point during the year, charges revert to the self-pay rate.*

**PREFERRED PAYMENT METHOD**

Online credit/debit  Campus cashier  Drop box at cashier area  Mail in  FA auto deduction

**I understand that I am responsible for all child care fees incurred in the event the above-marked subsidy does not cover the child care fees.** You, the undersigned, will notify the fiscal specialist of any changes on your financial agreement. This agreement is renewable annually.

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

**Working Connections Child Care (WCCC) Release of Information:**

I hereby authorize applicable WCCC community service office staff to exchange information with CCS Child Care Programs staff regarding WCCC.