

Hattie Mae's Playcare

Janell Allen-Collins

5104 Portola Ct.

Antioch,CA 94531

Lic.# 073409069

(925) 826-2567

Hours Monday-Friday 6am to 6:00pm with Flexibility on a case by case basis

Age	Part Time Weekly	Full Time Weekly
Infants 0-36 months	218.00	299.00
Preschool 3-5 years old	205.00	278.00
School Age 6+	150.00	210.00

Holidays and Non Operational Days These are (NON )Paid Days

June 26th  
June 29th  
June30th  
July 1st  
July 2nd  
December 28th  
December 29th  
December 30th  
December 31st  
January 1st

I charge the same rates to all non subsidized families as subsidized families. Charges are based on enrollment not attendance.

Registration Fee: \$100.00 per child

Acknowledgement of receipt of daycare handbook

I certify that I have received, read and agree to all the terms listed in the Hattie Mae's Play Care handbook and my contract. I am responsible for reading all addendum that may be added to the handbook in the future.

Name printed: \_\_\_\_\_

Date: \_\_\_\_\_

Name Signature: \_\_\_\_\_

## Permission to Take Photos

I, \_\_\_\_\_ give my daycare provider \_\_\_\_\_  
 \_\_\_\_\_ permission to take and use still photographs or videos of my  
 child(ren) \_\_\_\_\_ in the following ways:

<b>Photo Authorization</b>	(Check One)	
	Grant Permission	Decline Permission
Daycare Provider's Photo Books	<input type="checkbox"/>	<input type="checkbox"/>
Craft Projects	<input type="checkbox"/>	<input type="checkbox"/>
Share with Current Clients (via newsletter, bulletin boards, etc.)	<input type="checkbox"/>	<input type="checkbox"/>
Promotional Material for Prospective Clients	<input type="checkbox"/>	<input type="checkbox"/>
Online: Facility's Business Website	<input type="checkbox"/>	<input type="checkbox"/>
Online: Facility's Private Facebook Page	<input type="checkbox"/>	<input type="checkbox"/>
Online: General Social Media sites (i.e. Facebook, Twitter, Instagram, etc.)	<input type="checkbox"/>	<input type="checkbox"/>

(Photos may be taken by the provider, an assistant, a staff member or other  
 delegated photographers, but will never be sold for commercial use.)

\_\_\_\_\_  
 (Initials) I understand that it's my responsibility to update this form if I wish to retract permission in  
 category listed above.

\_\_\_\_\_  
 (Initials) I understand that permission is given for the entire period of my child's enrollment unless I (  
 update the form.

\_\_\_\_\_  
 (Signature of Parent/Guardian)

\_\_\_\_\_  
 (Date)

\_\_\_\_\_  
 (Provider's Signature)

\_\_\_\_\_  
 (Date)