



City of SACRAMENTO  
Youth, Parks, & Community Enrichment

4<sup>th</sup> "R" Site: \_\_\_\_\_

Family Discount: \_\_\_\_\_

**CITY OF SACRAMENTO**

**4<sup>TH</sup> "R" SCHOOL-AGE CARE**

915 I Street, 3<sup>rd</sup> Floor, SACRAMENTO, CA 95814

TAX ID #: 946000410

[www.4thRchildcare.com](http://www.4thRchildcare.com)

**REGISTRATION AND AGREEMENT FORM**

**July 1, 2020 – June 30, 2021**

Child's Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_ Age: \_\_\_\_\_

School Attending: \_\_\_\_\_ 2020/2021 Grade: \_\_\_\_\_ Teacher: \_\_\_\_\_

Parent/Guardian's Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Parent/Guardian's Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Has your child attended 4<sup>th</sup> "R" before? Yes/No If yes, When: \_\_\_\_\_ Site: \_\_\_\_\_

**Open Monday-Friday 7:00am - 6:00pm**

**CLOSED for ALL City Holidays:**

7/3, 9/7, 11/11, 11/26, 11/27, 12/24, 12/25, 12/31, 1/1, 1/18, 2/15, 3/31, 5/31      (initial)

**REGISTRATION FEE: \$100 per family due upon enrollment for the 2020/2021 contract year (check or money order only). I understand that the REGISTRATION FEE IS NON-REFUNDABLE      (initial)**

**My child will start 4<sup>th</sup> "R" on (month/date):                      Monthly Category:**

<u>Category</u>	<u>Rate</u>	<u>Description of hours</u>
A	\$565	Prearranged monthly usage greater than 100 hours
B	\$475	Prearranged monthly usage greater than 80 hours and up to 100 hours
C	\$395	Prearranged monthly usage greater than 65 hours and up to 80 hours
D	\$360	Prearranged monthly usage greater than 50 hours and up to 65 hours
E	\$325	Prearranged monthly usage greater than 35 hours and up to 50 hours
F	\$270	Prearranged monthly usage greater than 25 hours and up to 35 hours
G	\$195	Prearranged monthly usage greater than 15 hours and up to 25 hours
H	\$130	Prearranged monthly usage greater than 10 hours and up to 15 hours
I	\$75	Prearranged monthly usage up to 10 hours

# REGISTRATION AND AGREEMENT FORM

## 2020 - 2021 SCHOOL YEAR

1. **\_\_\_\_\_ (initial) ENROLLMENT AND ATTENDANCE:** I must complete and submit all necessary forms provided by 4<sup>th</sup> "R" prior to my child's attendance, which includes: registration form, licensing information, registration fee and new families must pay first month's tuition in advance. Enrollment is on a first come/first serve basis. **Per Community Care Licensing regulations and 4<sup>th</sup> "R" Child Care Program policies, all children in the program must be checked in and out by an authorized parent/guardian or authorized designee (18 years or older) upon arrival and departure by signing the sign in and out sheet with a legal signature (no initials).**
2. **\_\_\_\_\_ (initial) CATEGORY CHANGES:** If your child's care exceeds the maximum hours in the designated category, the difference in the amount owed for the next category will be billed with the next month's fee's. **In order to change your current category, an amendment form must be turned in by the 15<sup>th</sup> of the month prior to care.** Amendments not received by this date will result in continued billing in the assigned category, even if all hours are not used.
3. **\_\_\_\_\_ (initial) MULTI- CHILD DISCOUNT:** 10% will be deducted per family from fees when more than one child in a family is registered and attending simultaneously. Discount does not apply to late penalty and late pick-up fees.
4. **\_\_\_\_\_ (initial) SIGN IN/OUT:** I give permission to 4<sup>th</sup> "R" staff to sign my child in/out before/after school. I understand that 4<sup>th</sup> "R" is not responsible for my child while he/she is attending school or while participating in on campus activities.
5. **\_\_\_\_\_ (initial) ILLNESS:** My child will not attend 4<sup>th</sup> "R" when ill. If my child falls ill at school, they may not attend 4<sup>th</sup> "R". If my child becomes ill while attending 4<sup>th</sup> "R", my emergency designee or I will pick up my child within 1 hour of being notified.
6. **\_\_\_\_\_ (initial) DISCIPLINE: Participation in 4<sup>th</sup> "R" is conditional and based on an initial 20-day probation period.** My child must be able to get along with others and adhere to the rules of the program. I understand that acceptable behavior is required to ensure continued participation throughout the enrollment period. If disenrollment for disciplinary reasons occurs, a minimum of a 6-month waiting period must pass before re-enrollment can occur at any 4<sup>th</sup> "R" site, and only on a space available basis. If your child is suspended from school, they are also suspended from 4<sup>th</sup> "R". The City reserves the right to deny enrollment into 4<sup>th</sup> "R" due to behavioral issues which occur during program and/or school hours. 4<sup>th</sup> "R" does not practice corporal punishment.
7. **\_\_\_\_\_ (initial) PARENT/GUARDIAN CONDUCT:** I understand that it is necessary for parents/guardians and those authorized to pick up my child, conduct themselves in a respectful and mature manner toward staff and the other children while at the 4<sup>th</sup> "R" site and administrative office. Failure to do so will result in disenrollment of your child from 4<sup>th</sup> "R".
8. **\_\_\_\_\_ (initial) PAYMENT:** The following forms of payment will be accepted by 4<sup>th</sup> "R": money order or check made payable to the City of Sacramento, Visa, MasterCard, Discover, and AMEX. **Registration & first month fees can be accepted at the sites via money order or check only. CASH IS NOT ALLOWED AS A FORM OF PAYMENT.** All monthly payments thereafter must be mailed to the 4<sup>th</sup> "R" Administration office at 915 I Street, 3<sup>rd</sup> Floor, Sac. CA 95814, made online via click to pay or EZ EFT Draft (see site for details).
9. **\_\_\_\_\_ (initial) DISENROLLMENT:** Full payments including accrued fees that have not been received by the **15<sup>th</sup> calendar day of the month by 12:00pm will result in disenrollment the following business day.** Re-enrollment will be permitted if there is space available and all past and current monthly fees are paid in full.
10. **\_\_\_\_\_ (initial) FEES AND LATE PAYMENT PENALTY:** I agree to pay the 4<sup>th</sup> "R" annual registration fee and on-going monthly fees for my child/ren to participate in 4<sup>th</sup> "R". **My full monthly payment is due by the 1<sup>st</sup> calendar day of each month and is considered late after the 7<sup>th</sup> calendar day of the month (payment must be received by the 7<sup>th</sup> of month). A \$25 late fee will be assessed for payments received after the 7<sup>th</sup> calendar day of the month.**
11. **\_\_\_\_\_ (initial) RETURNED CHECKS/DECLINED EFT:** A fee will be assessed for returned check payments or a declined EFT. After your first returned check, we will not accept any additional checks during this contract year.
12. **\_\_\_\_\_ (initial) DELINQUENT ACCOUNTS:** Upon disenrollment, delinquent accounts will be forwarded to the City of Sacramento Enforcement and Collections office (and/or a collection agency). This collection effort will include all program fees owed as well as collection costs and may result in wage garnishments. If your account defaults twice into the collection process, you may NOT re-enroll until the following contract year.
13. **\_\_\_\_\_ (initial) LATE PICK-UP PENALTY:** I understand that if I or my designees do not pick up my child by 6:00 p.m. I will be charged a late pick-up fee of \$5.00 for each 5 minute increment. This charge is per child until the child/ren is picked up. If the child/ren is not picked up by 6:45 p.m. and program staff are unable to contact emergency contacts, Child Protective Services will be called. Payment of the late pick-up fee will be charged on the next billing cycle. If payment for the late pick-up is not received by the 7<sup>th</sup> of the following month, a \$25.00 late fee will be assessed to your account. **I understand that four late pick-ups within a contract year will result in immediate disenrollment from 4<sup>th</sup> "R".** You may not re-enroll until the start of a new contract year.
14. **\_\_\_\_\_ (initial) REFUNDS:** 4<sup>th</sup> "R" does not provide refunds for unused hours or disenrollment for any reason.
15. **\_\_\_\_\_ (initial) ALTERNATIVE PAYMENT AGREEMENT:** All parents/guardians participating in alternative payment programs (Child Action, CalWORKs, PACE, etc.) are responsible for any fees or portions thereof not covered by the alternative payment program. If the alternative payment program does not pay the full amount you will be held responsible for the difference. Failure to pay the difference will result in disenrollment from 4<sup>th</sup> "R".

# REGISTRATION AND AGREEMENT FORM

## 2020 - 2021 SCHOOL YEAR

16. [redacted] (initial) **TERMINATION OF AGREEMENT:** If you wish to terminate 4<sup>th</sup> "R" services, a written notice must be submitted to the administration office thirty (30) days prior to the disenrollment. Failure to do so will result in a category fee assessment for services through the end of the month following the receipt of the notice.
17. [redacted] (initial) **RATE INCREASES:** The rates that are set forth in this registration and agreement form are subject to revision by the City of Sacramento at any time; families will receive written notice of rate changes in advance.
18. [redacted] (initial) **PARENT/GUARDIAN INFORMATION:** I have read all information provided and discussed any questions I have with the Program Coordinator. I have read and accept 4<sup>th</sup> "R" policies, procedures, and responsibilities as outlined in the Parent Handbook. The Department of Social Services, Community Care Licensing, which governs our program through Title 22, will be making periodic visits to all 4<sup>th</sup> "R" sites. These visits are to evaluate the program and to ensure that all state mandated regulations are being maintained. The licensing analyst may speak to any 4<sup>th</sup> "R" child/ren during these visits and we want to make you aware of this in advance.
19. [redacted] (initial) **MEDIA RELEASE AGREEMENT:** I give permission to the 4<sup>th</sup> "R" staff to photograph or videotape my child and grant my permission to be used in a brochure, web page, or other means of promoting 4<sup>th</sup> "R" to the public.
20. [redacted] (initial) **I have read, understand and will abide by the conditions of the entire 2020/2021 Registration Agreement.**

[redacted]  
Print Name of Parent/Guardian

[redacted]  
Signature of Parent/Guardian

Date of Birth: [redacted] Driver's License #: [redacted] Date: [redacted]

[redacted]  
Print Name of Parent/Guardian

[redacted]  
Signature of Parent/Guardian

Date of Birth: [redacted] Driver's License #: [redacted] Date: [redacted]

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**\* Administrative Use ONLY \***

This registration agreement supersedes all previous agreements. EFFECTIVE DATE: \_\_\_\_\_

\_\_\_\_\_  
Print Name of Administration Staff

\_\_\_\_\_  
Signature of Administration Staff

\_\_\_\_\_  
Date

Registration fee received: \_\_\_\_\_

\_\_\_\_\_  
Date

\_\_\_\_\_  
Type of payment / #

\_\_\_\_\_  
Initials

Third Party Pay Type: \_\_\_\_\_

Family ID: \_\_\_\_\_

Contract information updated in EZCARE: \_\_\_\_\_

Child ID: \_\_\_\_\_