



# HOURLY PARENT FEE AGREEMENT—CNICCYP 1700/39

OPNAVINST 1700.9 (series)

## COMPLETION INSTRUCTIONS

All Navy Child and Youth Programs (CYPs) must electronically fill in the child’s name, sponsor’s name, and signature dates for the sponsor and the CYP Professional prior to reviewing and signing. Government Common Access Card (CAC) electronic signatures or written signatures are accepted.

## SECTION I CHILD’S NAME

<b>Child’s Name</b>		<b>Child’s Name</b>	
<b>Child’s Name</b>		<b>Child’s Name</b>	

## SECTION II PARENT’S AGREEMENT

To use hourly care services in CYP, I agree to the following:

- I will pay a rate of \$5 per hour per child (1 hour minimum) for hourly care provided at CDCs, 24/7 Centers, and SAC programs. I understand that any portion of an hour is charged at the full-hour rate. If I use hourly care services with a CDH Provider, I understand that the hourly rate is set by the CDH Provider, and the arrangement is a private pay agreement between the CDH Provider and me.
- I understand that hourly reservations may be made, cancelled, and paid for in advance through CYP Online Services.
- I will pay my fees in full on a daily basis, using CYP Online Services or in person with a credit card before dropping off my child for my scheduled reservation.
- I will make a reservation for a specific amount of time with the understanding that there could be a reservation before and/or after my specified time. For example, if my reservation is from 9 a.m. to 1:30 p.m., I must drop off my child at 9 a.m. and pick up by 1:30 p.m. I understand that I will be charged from the beginning of my reservation and/or arrival time through pickup. For example, if my reservation is for 9 a.m. and I arrive at 8:30 a.m., I will be charged the hourly fee from 8:30 a.m. until pickup, **if space is available**. If my reservation is for 9 a.m. and I arrive at 9:25 a.m., I will be charged the hourly fee starting at 9 a.m.
- I will cancel my reservation 24 hours before the scheduled time if it is no longer needed. If the reservation is on a Monday, I may cancel when the program opens on Monday morning.
- I understand that I will lose my reservation if I arrive 30 minutes past the scheduled arrival time. If I do not call or arrive by that time, the reservation will be considered a no-show, and the space will be given to another child.
- I agree to pay the no-show fee for the entire reservation (not to exceed \$15) before I can make another reservation. If I have two no-shows per child, I may not be allowed to make reservations for 30 calendar days from the last no-show date.
- I will pick up my child prior to the posted facility closing time. I understand that I will be charged a late fee of \$1 per minute (not to exceed \$15) **in addition to** the hourly rate that will continue to be charged until my child is picked up.
- I understand that I will not be charged for meals, snacks, transportation, or field trips.
- I will be responsible for the full payment of my reserved hours. If my child needs to stay longer, I must contact the program for approval at least 30 minutes in advance of the beginning of my reservation time. If space is not available for the requested additional time, I must pick up my child at the original reservation end time.
- I understand that if my child has a special need or requires special accommodations, my case may be reviewed by the Inclusion Action Team and the program will make every effort to accept my child into hourly care. I will share with the program any potentially life threatening medical conditions or needs that may affect my child while in hourly care and ensure any necessary instructions, medications (authorizations for medication administration) are provided to the program staff prior to my child’s first stay in hourly care.
- Each time my child is in hourly care, I will provide a phone number on the sign in sheet where I can be reached in an emergency.
- I will provide the needed supplies (e.g., diapers/pullups, wipes, cream, changes of clothes, clothes appropriate for outdoor play). If my child is an infant, I will provide all bottles and any other food required by my child. I understand that all bottles must be pre-made, and all bottles and food I bring must be labeled with my child’s first and last name and the date prepared.
- I understand that I may use hourly care for no more than 25 hours (for CDC or 24/7 Centers) and/or 10 hours (for SAC Before & Afterschool) per week. I understand that my child cannot stay in hourly care for more than 12 consecutive hours.

## SECTION III PARENT & CYP CERTIFICATION

I understand that I will sign a new fee agreement if there is a change in the hourly care fees or policies.

SPONSOR NAME (Print Name)			
SPONSOR SIGNATURE		DATE	
CYP PROFESSIONAL SIGNATURE		DATE	