My Place Family Day Care Office Copy Fee Schedule

The My Place FDC approved fee parameters are between \$6.00 to \$17.50 for standard and non-standard hours

| This is to confirm that I will apply the following | | | | | | | | |
|---|------------------------------|----------------------|------------------------------|---------|----------|-----------|--|--|
| Fees from Mon | day | (Date) Educa | ator Signature: _ | | | | | |
| Type of Fees Part time/c | - | ☐ Standard Car | re 🗆 B/A Schoo | ol Care | □ Vaca | tion Care | | |
| Please clarify wha | t you consider to be | a part time and casu | al booking: | | | | | |
| If using multiple rates, please fill out a separate form for each rate. | | | | | | | | |
| Service Charging Practices | | | | | | | | |
| Child Service Fee: \$1.45 per hour per child is charged to each family. | | | | | | | | |
| Educator Charging Practices | | | | | | | | |
| Please enter your fees (not including the Child Service Fee above) | | | | | | | | |
| Standard hour | <u>·s</u> - | Monday - Frid | day 8am to 6pm | 1 | \$ | per hour | | |
| Non Standard | hours - | Monday - Frid | day 6pm to 8am | l | \$ | per hour | | |
| Weekend Car | <u>e</u> - | Saturday/Sund | day | | \$ | per hour | | |
| Public Holida | <u>y</u> - | Where care is | provided | | \$ | per hour | | |
| If booked care falls on a public holiday and care is not required, normal fees are charged. | | | | | | | | |
| Sundry Fee | es | | | | | | | |
| Early/ Late Drop Off or Pick Up Fee (no CCS) \$ | | | | | | | | |
| Late Payment Fee (no CCS) | | | | | \$ | | | |
| Transport | | | | \$ | (| per trip) | | |
| Meals: | Breakfast Lunch Dinner | \$ \$ \$ | Morning Tea Afternoon Tea | | \$ \$ | | | |

Public Holiday Educators are entitled to choose one public holiday each year. Please tick one.

| ☐ Brisbane (Ekka) Show Day Wednesday | ☐ Brisbane (Ekka) Show Day Monday |
|--|--|
| ☐ Ipswich Show Day | ☐ Logan Show Day |
| ☐ Toowoomba Show Holiday | ☐ Gold Coast Show Day |
| ☐ Other (please specify): | |
| Absences | |
| All families are eligible for a total of 42 fundo. These absences will be charged at normal rates. at a full fee rate. Please refer to Section 6. Payr. | Absences used after the first 42 may be charged |
| Notice | |
| Parents/Guardians must be given 28 days' notic the Fee Schedule. It is the Educator's responsib Parent/Guardian Fee Schedule form. A copy month on the Educators' files. | pility to ensure that parents/guardians sign the |
| A copy of this Fee Schedule MUST be provided into effect. | d to the office 28 days before it is due to come |
| Educator Signature: | |
| For office use only Service Approval: YES N | О |
| Signature: | |