

TAMPEREEN KAUPUNKI

Hallintoyksikkö/Erityispalvelut

Asiakasmaksut/Varhaiskasvatus

Address: PL 487, 33101 TAMPERE

Serial Number

Received

____ / ____ ____

CLIENT FEE FORM**(changes)****Please fill a separate form for each child and preschooler who is affected by the change**

Name of the child	Social Security Number	Daycare Center / Family Daycare

Other children under 18 years

Name of the child	Social Security Number	Daycare Center / Family Daycare

Parent/Guardian 1:	Social Security Number
e-mail:	Tel
Parent/Guardian 2:	Social Security Number
e-mail:	Tel

A) Changes in income starting from

____ / ____ ____

 Agreement to pay the highest category fee
 Entrepreneurship (Fill appendix 1)

(No income declaration, valid until cancelled)

 Changes in income
Declare your household's gross income. Gross income means income before taxes etc. are deducted.

Attach documentation showing your households main income source (e.g. most recent pay slips of parents/guardians). You may be required to provide further documentation if the income information is deemed incomplete. Giving false income information or withholding said information may result in a retroactively increased day care fee for a maximum period of one year. If the children of the household have income, declare them at the end of the form.

Income type	Parent/Guardian 1:	Parent/Guardian 2:	Reason for change:
Salary/wage (do not include vacation bonus)			
Fringe benefits			
Unemployment allowance €/day			
Maternity/Paternity allowance €/day			
Other allowance/benefit, specify			
Received alimony per child			
Other income, specify			
Other income, specify			
Paid alimony			

TAMPEREEN KAUPUNKI

Hallintoyksikkö/Erityispalvelut
Asiakasmaksut/Varhaiskasvatus
Address: PL 487, 33101 TAMPERE

B) Change in need of service starting from ____ / ____ ____

- | | |
|---|---|
| <input type="checkbox"/> Whole day daycare | <input type="checkbox"/> Preschool 4 hours/day |
| <input type="checkbox"/> Daycare not more than 20 hours/week | <input type="checkbox"/> Preschool + daycare not more than 5hrs/day |
| <input type="checkbox"/> Half day daycare not more than 5 hrs/day | <input type="checkbox"/> Preschool + daycare more than 5 hrs/day |
| <input type="checkbox"/> Agreement days _____ / month | |
- (Valid for at least 5 months)

C) Changes in family starting from ____ / ____ ____

- | | |
|---|---|
| <input type="checkbox"/> a newborn child | <input type="checkbox"/> a member of the family turned 18 |
| <input type="checkbox"/> a new marriage or cohabitation | <input type="checkbox"/> judicial separation or divorce |

D) Other changes starting from ____ / ____ ____

Specify _____

I consent to receiving official decisions concerning children's daycare service and fees as electronic messages to the Early Education's Online Service. The parent/guardian will be notified of a decision arriving in the Online Service via SMS to the mobile number stated in this form. The parent/guardian is responsible for updating his/her contact information upon possible changes. The City of Tampere must be immediately informed of any changes in contact information by a written announcement or through the Online Service.

I confirm that the information I have given on this form is correct and that the information will be checked if needed. False or withheld income information may lead to retroactively increased day care fee for a maximum time of one year.

Tampere ____ / ____ ____

Parent's/Guardian's signature

Further information Mon - Fri 9 - 11 am tel. 040 180 8476, asiakasmaksut.paivahoito@tampere.fi