

HOME CHILD CARE AGREEMENT

THE FOLLOWING AGREEMENT IS MADE BETWEEN:

Caregiver's Name
Address
Home Phone

Parent's Name
Address
Home Phone
Work Phone
2 nd Parent's Name
Address
Home Phone
Work Phone

REGARDING THE CARE OF

_____ Child

THIS AGREEMENT COVERS THE PERIOD

Start Date _____ Renewal Date _____

DETAILS OF DAYS AND TIME AGREED UPON

	Arrival Time	Departure Time
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		
Saturday		
Sunday		

DETAILS OF FEE PAYMENT PER CHILD

Regular Fee \$ _____	per day or \$ _____	per month
Overtime Fee \$ _____	per _____	
Payment Due _____		
Late Payment Fee \$ _____	per _____	until the balance is settled
NSF Fee \$ _____		

DETAILS OF TERMINATION OF CONTRACT

_____ weeks written notice must be given to the other party by the party who wishes to terminate this contract

SIGNATURES

CAREGIVER	PARENT/GUARDIAN
_____	_____
DATE _____	DATE _____