

CHILD CARE SCHEDULE, PAYMENT & FEE AGREEMENT

I, _____ and _____,
Parent or Guardian Parent or Guardian

agree to pay \$ _____ per _____, due on _____, for child care
as scheduled below to _____.

Provider's name

1) In the event my child or children are cared for at times additional to those scheduled, I agree to pay an additional **overtime charge** per hour of \$ _____ due _____.

2) Additional fees agreed upon: **Registration** \$ _____ per _____

Activity/Material \$ _____ per _____ **Deposit** \$ _____ for _____

3) I understand I will be expected to pay the costs of regular child care whether my child or children are in care or not to hold the slot(s) in my provider's business. Yes/No, initial _____

4) This will include my and the provider's vacation times. Yes/No, initial _____

5) This will include my child's or family sick time. Yes/No, if yes initial _____

6) My provider agrees to give me _____ notice before any change is made to charges or fees, and will provide me with a new Agreement in the event of a change.

7) My provider agrees to give me _____ notice for personal/vacation time.

Child Care Schedule:

Child #1 Name _____

Days & hours _____

Child #2 Name _____

Days & hours _____

Child #3 Name _____

Days & hours _____

Parent's Name

Provider's Name

Parent's Signature

Provider's Signature

Date

Date