

Parent - Provider Child Care Agreement

_	_	_	parent(s)/ guardia			
Child's date of E	Birth:					
Parent/guardia	n name:					
Parent /guardia	an name:					
Parent's Addres	SS:					
Parent's Phone:	:					
		agreement as follo				
-						
Hours:			Ontil.			
nours:						
	Monday	Tuesday	Wednesday	Thursday	Friday	
Times						
Fees:						
Standard care:		per day/v	veek/month			
Additional Char	ges:					
Payment is due	weekly/bi-we	ekly/monthly on	every			
Enrolment fee \$	50 is require	d at the time of er	nrollment.			
I/We agree to a	bide by the wr	itten terms and d	aycare policies of t	his agreement.		
Parent/Guardian Signature				Date:		
Provider's Signa	ature			Date:		