

Child Care Agreement

Child's name:	First	Middle	Last
Parent or guardian name:	First	Middle	Last
Parent or guardian name:	First	Middle	Last
Days and times my child will receive care:			
Check days of care	<input type="checkbox"/> Sunday	<input type="checkbox"/> Monday	<input type="checkbox"/> Tuesday
	<input type="checkbox"/> Wednesday	<input type="checkbox"/> Thursday	<input type="checkbox"/> Friday
	<input type="checkbox"/> Saturday		
Arrival time			
Departure time			
Fee: \$ _____ per:		Date payment due:	
<input type="checkbox"/> Hour <input type="checkbox"/> Day <input type="checkbox"/> Week <input type="checkbox"/>		Source of payment: <input type="checkbox"/> Parent <input type="checkbox"/> Other (specify):	
Overtime rate: \$ 12.50 per hour		Late fee: \$ 5 per hour	
Other Fees: \$ 50 Description: Registration Fee		Other Fees:\$ 200 Description: Deposit	
<p>I agree to promptly notify the child care provider of any changes of the above information. I understand that I am fully responsible for the terms of this agreement as stipulated.</p> <p>I have read, understand and agree to comply with the policy and procedures and information for parents given to me by <u>Shohreh Maghoul</u></p>			
Name of licensee			
Parent or guardian signature		Date	
Parent or guardian signature		Date	
<p>I agree to provide child care services according to the above plan. I agree to promptly notify the parents or guardians of any changes to above information.</p>			
Licensee signature		Date	
Street address: 3236 Charlemagne Ave		City: Long Beach	
State: CA		Zip code: 90808	
Comments			