

## 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