**Sample Family Child Care Contract**

1. **Name of the Parties for the Contract**

Name of child care provider:

Address:

Phone:

Cell Phone:

Email:

Name of parent/guardian:

Address:

Home Phone:

Work Phone:

Cell Phone:

Email:

Name/address of employer:

Name of parent/guardian:

Address:

Home Phone:

Work Phone:

Cell Phone:

Email:

Name/address of employer:

Name of Child:

Date of Birth:

Name of Child:

Date of Birth:

1. **Hours of Care**

The first day of care will be *{LIST FIRST DAY OF CARE}*. Child care operating hours are *{LIST HOURS OF CHILD CARE}*.

1. **Term of Payment**

Child Care Fees are $\_\_\_\_\_\_\_\_\_\_\_\_\_*}* per *{CHOOSE HOUR/WEEK/MONTH}*. Payment is due *{LIST WHEN PAYMENT IS DUE}*. Late pick up fee of $\_\_\_\_\_ will be charged in the event you pick up your child after *{ENTER TIME}*.

1. **Payment Methods**

Accepted methods of payment include cash, personal check, credit card, or money order.

If a personal check is returned due to a lack of funds, the parent/guardian must pay a $ *{*\_\_\_\_*}* returned check fee. If a check is returned more than one time, only cash or money orders will be accepted as payment.

If a payment is not made on time, the following fee will apply: $*{*\_\_\_\_\_\_\_*}*

1. **Overtime rates are as follows:**

For the purpose of this contract, overtime rates are considered any amount of time that care occurs prior to the scheduled drop off time or after the scheduled pick up time.

With advance notice by the parent and approval by the provider, the provider agrees to provide overtime care at a rate of $*{*\_\_\_\_\_\_\_\_\_\_*}* per hour.

Without advance notice by the parent and approval by the provider, the overtime rate will be $*{*\_\_\_\_\_\_\_\_\_*}* per hour.

1. **Payments during Holidays, Vacations, and Other absences:**

The provider will not be open for business on the following Holidays:

*{LIST HOLIDAYS YOU WILL BE CLOSED}*

Parents {*are or are not}* expected to pay for care on those Holidays.

The provider will take *{LIST NUMBER OF WEEKS YOU WILL BE CLOSED}* weeks’ vacation during the calendar year and will give parents *{LIST NUMBER}* weeks’ notice of such upcoming vacations.

Parents *{are or are not}* expected to pay for care on those vacation days.

If a parent plans on taking a vacation and the child will not be in care, the provider must be given *{*\_\_\_\_\_*}* weeks’ notice.

Parents {*are or are not}* expected to pay during their scheduled vacations.

When the provider is ill and unable to provide care, she will make every

effort to provide as much notice as possible.

Parents *{are or are not}* expected to pay on provider sick days.

When a child is ill, the parents are expected to make every effort to give the

provider as much notice as possible.

Parents {*are or are not}* expected to pay on child sick days.

If a child does not arrive for the day and no notice has been given to the provider, parents are still expected to pay.

1. **Additional charges:**

The provider will charge additional fees as follows: (i.e. for supplies, special trips, damaged property, etc.).

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1. **Termination Procedures:**

This contract may be terminated by the parent(s) or the provider with *{ENTER NUMBER OF WEEKS}* week notice prior to the last date of care is required.

*The provider may immediately terminate this contract without any notice if payment is not made on time.*

**Other:**

• *If the provider chooses not to enforce any portion of the contract, it does not give up the provider’s right to enforce any other portion of the contract.*

• *The contract can be revised at any time by the provider if necessary.*

**Signatures:**

The signatures below indicate agreement with this contract and with the written policies of the provider (contained in a separate document). The provider may change policies as needed with advance written notice.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent’s name Parent’s signature/date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent’s name Parent’s signature/date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Provider’s name Provider’s signature/date

*If the parent or legal guardian is under the age of 18, a co-signer must sign this agreement and act as guarantor to the contract and agree to be bound by all financial terms.*