CHILD CARE CONTRACT

(SAMPLE) NAME OF BUSINESS

Hours of operation	
Comments:	
Fees	*(consider - monthly tuition, daily rate, part time rate, hourly rate, etc)
Comments:	
Payment Schedule	*(consider – when will payments be due? Weekly, every
Comments:	other week, monthly, pre-pay?)
Vacation Policy:	
Provider -	
Family -	
Comments:	
Sick Leave/Absence	es Policy:
Provider	Family
Comments:	
Alternate Care Poli	cy -
Comments:	
Termination of Car	e Policy –
Comments:	
I nave read, unders	tand, and agree to the above policies.
——————————————————————————————————————	re Date