

Child Care Contracts
Sample Parent/Provider Child Care Contract

This contract is entered into by and between _____ of _____
(Parent) hereinafter "Parent" and
_____ of _____
(Address) hereinafter "Provider", for the
(Provider) purpose of securing arrangements for child care of _____
(Address) hereinafter "Child/ren". (Name of Child or Children)

The Parent Agrees:

1. To pay the Provider the rate of \$ _____ per _____ for child care services for their child/ren.
2. To pay the provider on _____
(when payment is due).
3. To pay the provider _____ for holidays and days when the child is
(Rate) absent due to illness or vacation. Such holidays shall consist of the following: New Year's Day, Memorial Day, Fourth of July, Labor Day, Thanksgiving Day, and Christmas.
4. To pay an **overtime rate of** _____ per _____ when the child/ren is picked up late. Late fee may be waived if prior notice is given to Provider by the Parent.
5. To provide the following supplies for their child: _____
6. To **have backup child care arranged** in the event of an emergency or illness of the provider.

The Provider Agrees:

1. To provide child care services for the above named child/ren for the hours and days stated below except in the case of illness and/or emergency.
2. To provide a safe environment for the children.
3. To provide appropriate activities and toys for the children.
4. To communicate with the parent about the needs and achievements of the child.

Both Parent and Provider Agree:

1. That the hours and days of child care shall be _____
(for example: Mon - Fri, 7:00am to 6:00pm).
2. That child care will not be provided if either the child or the Provider shall be considered to be too ill to receive or provide care.
3. That the Provider will give at least _____ notice of any planned vacations or temporary closings of the child care.
6. That a minimum of _____ notice is given by either the parent or provider to terminate this contract.
7. That parents may visit or call at any time during normal child care hours to discuss or check on their child/ren.

Parent Signature(s) _____ **Date** _____
_____ **Date** _____

Provider Signature _____ **Date** _____