



The following is an agreement between (Parent)\_\_\_\_\_

And (Provider)\_\_\_\_\_

for childcare to be provided for on (Date) \_\_\_\_\_.

(Name(s) of child(ren))

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

A non-refundable deposit of \_\_\_\_\_ will hold a space for the child(ren).

A weekly childcare fee of \_\_\_\_\_ is due the morning of the Friday before the Monday of the weekly service.

- Payments are paid at Cash App. **SProverbschildcare67**
- Hours of operation are **6:30am to 6:30pm** Monday thru Friday.
- There is a \$1.00 late fee per minute at 6:31pm that can also be sent via Cash App.
- Provider or parent may terminate this contract at any time with 2 weeks written notice.
- All fees due become payable at time of contract termination.

Parent's Signature \_\_\_\_\_

Parent's EMail \_\_\_\_\_

Provider' Signature \_\_\_\_\_

Address: 739 Stonebridge Park Circle Lithonia Ga. 30058

Phone: 404-428-7346