



# Agency Agreement

Client Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Child's Name: \_\_\_\_\_

I authorize Care for Kids, Inc., the Agency, to act as a referral Agency when I request services. I understand that the child care providers referred by the Agency are my employees and that the Agency is not their employer. If I employ a worker on a referral from the Agency, in consideration of the referral, screening and support services are provided by the Agency. I authorize the Agency to charge my credit card for the Registration and Agency Rate described in the rate schedule enclosed (rates are subject to change). I will use the services of the child care providers referred by the Agency only when utilizing services through the Agency. Upon violation of this restriction, I will pay the Agency \$1,000.00 as and for liquidated damages. I agree to hold the Agency harmless of any loss, damage, destruction or accident claims which arise out of or in connection with the rendering of any services by any worker referred by the Agency.

All cancellations must be made 48 hours in advance of service to avoid an \$80.00 cancellation fee. Cancellations requiring a non-refundable deposit must be made 2 weeks prior to the requested date of service to avoid paying the Agency and Child Care Provider fee in full.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date