

FAMILY FEE CONTRACT

ONE CHILD PER CONTRACT		
	Surname	Given name
Parent Name		
Child name		
Other parent/guardian		
CRN		
Carer Name: _____	<input type="checkbox"/> New Contract <input type="checkbox"/> Change booked hrs <input type="checkbox"/> Change booked days <input type="checkbox"/> New fee schedule Date to commence:	
Address: _____		
Phone No: _____		

Day	Booked Arrival Time	Booked Departure Time	Hours	X children	Total hrs
Monday					
Tuesday					
Wednesday					
Thursday					
Friday					
Saturday					
Sunday					
			Total hours in week		

ESTIMATE OF FEES

Step		=	\$
1	Total hrs x total hourly fee (from fee schedule)		
2	Total hours x CCB formula x family CCB %		
3	Parent fee = Step 1 minus Step 2		

	Name & Signature	Date
Carer		
Parent		

Office Use Only		
Date entered:	Date copied:	Staff member: