

Agreement for Respite Services

Agreement between Bluewater Respite Inc.

and Service Provider		
Street Address	Town/City	Postal Code
Email Contact Number Alternative Number This agreement is a legal and binding contract bet thoroughly discussed, and clearly and accurately r retained by both parties. The parent/s may be req 1. Parent/s agree to respite services for:	ecorded in the agreement. A copy of this Ag	
Name: Date of Birth	n://	
2. The parent/guardian understands there are more created at \$35.00/hr and billed to Any mileage out of area for special outings will be	· · · ·	r/s at a rate of \$28.00/hr. An invoice will be
 Any meetings with service providers, preparatio at the rate of \$35.00/hr. The Respite Service will take place for the number 		on behalf of the parent will result in additional fees and the Respite Service Coordinator.
4. The Respite Service will take place on a regular s find a replacement worker for that scheduled shift		individual contractor providing Respite Service to
5. Parent/guardian/s and Bluewater Respite Inc. a Failure to do will result in the parent/guardian/s b contracted to Bluewater Respite Inc. solely the res	eing billed by the contractor. Bluewater Resp	
6. Parent/guardian/s and the Bluewater Respite In party. Notice shall be received by the end of the la		ated upon 1 month with a written notice by either
7. Parent/guardian/s are aware that the contracto supervised by Bluewater Respite Inc.	r is not an employee of Bluewater Respite In	c. The contractor is an independent contractor
8. Parents/guardian/s agree they will not contract duration of this agreement as this is a liability issu attempt to hire privately any of Bluewater Respite	e. Upon termination of this agreement, pare	•
The parent/guardian/s and Bluewater Respite Inc. child/youth and/or adult. I hereby acknowledge that I am aware of the cond	litions stated in this agreement and agree to	abide by these requirements.
In witness whereof the parties hereto have set the at		,(year)
Name of Parent/Guardian	Signature of Parent/Guardian	
Name of the Bluewater Respite Inc. Coordinator	Signature of the Bluewater Respite Inc. Co	pordinator

Name of witness

Signature of witness