

THE BABYSITTING COMPANY

THE BABYSITTING COMPANY ("TBC") IS A CERTIFIED, LICENSED, AND FULLY INSURED REFERRAL SERVICE THAT OFFERS RELIABLE AND QUALIFIED SITTERS TO HOTELS, RESORTS, SPECIAL EVENTS, PRIVATE RESIDENCES, AND INTERNATIONAL AND DOMESTIC TRAVEL. SITTERS ARE HANDPICKED AND MATCHED PERFECTLY FOR EACH FAMILY'S NEEDS AND REQUESTS. ALL SITTERS ARE THOROUGHLY SCREENED, PERSONALLY INTERVIEWED, HAVE A CLEAR BACKGROUND CHECK AND DRUG TEST, A VALID CPR CERTIFICATION, SIGN A CONFIDENTIALITY AGREEMENT, AND ARE OVER 18 YEARS OLD. IN ADDITION, ALL SITTERS SPEAK FLUENT ENGLISH, AND MANY SPEAK OTHER LANGUAGES AS WELL. SITTERS CAN BE AVAILABLE AT ANY TIME OF THE DAY OR NIGHT FOR AS MANY HOURS AS NEEDED. TBC IS ABLE TO ACCOMMODATE MOST LAST MINUTE AND SPECIAL REQUESTS. ONCE THE SITTER IS CHOSEN, A PROFILE, INCLUDING THE SITTER'S FULL NAME, CONTACT INFORMATION, BIOGRAPHY AND PHOTO WILL BE PRESENTED (FOR RESERVATIONS MADE WITH 24 HOURS NOTICE). **WE STRICTLY ENFORCE A 4-HOUR MINIMUM.**

TO MAKE A RESERVATION, COMPLETE A RESERVATION REQUEST IN ITS ENTIRETY. A CREDIT CARD IS REQUIRED FOR ALL RESERVATIONS. VISA, MASTERCARD, AND AMERICAN EXPRESS ARE ACCEPTED. NO CASH. **FAX TO (888) 371.6410 OR E-MAIL TO RESERVATIONS@THEBABYSITTINGCOMPANY.COM**. ONCE RECEIVED, RESERVATION WILL BE CONFIRMED BY PHONE AND/OR EMAIL.

FOR RESERVATIONS MADE AFTER NORMAL BUSINESS HOURS OR FOR LAST MINUTE REQUESTS, PLEASE CALL DIRECTLY AT (888) 407.7822.

INDIVIDUAL FAMILY RATES

1-2 CHILDREN (SIBLINGS ONLY)	\$35 PER HOUR
3-4 CHILDREN (SIBLINGS ONLY)	+\$5 PER HOUR

MULTIPLE FAMILY RATES

AN ADDITIONAL \$10 PER HOUR FEE WILL BE CHARGED FOR EACH ADDITIONAL FAMILY USING THE SAME SITTER OR SITTERS (COUSINS, FRIENDS OR ANY OTHER RELATIONSHIP INCLUDED). WHEN SHARING A SITTER, CHILDREN MUST BE IN THE SAME ROOM OR HOME. ALL CHARGES ARE PROCESSED ON ONE CREDIT CARD. 20% GRATUITY ADDED TO THE TOTAL.

HOLIDAY RATES

FOR ALL HOLIDAYS, THERE WILL BE A \$50 NON-REFUNDABLE BOOKING FEE AND 20% GRATUITY ADDED TO THE TOTAL.

HOLIDAYS: NEW YEAR'S DAY*, VALENTINE'S DAY (AFTER 4PM)*, PRESIDENTS DAY, ST. PATRICK'S DAY, GOOD FRIDAY, EASTER SUNDAY*, FIRST NIGHT OF PASSOVER, MOTHER'S DAY, MEMORIAL DAY*, FATHER'S DAY, FORTH OF JULY*, LABOR DAY*, HALLOWEEN (AFTER 4PM)*, THANKSGIVING*, CHRISTMAS EVE (AFTER 4PM)*, CHRISTMAS DAY*, NEW YEAR'S EVE (AFTER 4PM)**.

*ADDITIONAL +\$10 PER HOUR FOR THESE HOLIDAYS

**\$75 PER HOUR FOR NYE

ADDITIONAL FEES

<u>PARKING</u>	CLIENT IS RESPONSIBLE FOR ALL PARKING CHARGES. IF SELF-PARKING IS NOT AVAILABLE OR IT IS UNSAFE, THE SITTER WILL VALET PARK AND THE FEE WILL BE CHARGED TO THE CLIENT.
<u>TOLLS</u>	CLIENT IS RESPONSIBLE FOR ALL TOLLS.
<u>SICK CHILDREN</u>	+\$10 PER HOUR (FEVER, RUNNY NOSE, COUGH, VOMITING, DIARRHEA, ETC.)
<u>SPECIAL NEEDS</u>	+\$10 PER HOUR (ADD, ADHD, BI-POLAR, AUTISM OR ANY CONDITION REQUIRING EXTRA ASSISTANCE)
<u>LATE END</u>	20% GRATUITY WILL BE ADDED TO RESERVATIONS ENDING AT 2 A.M. OR AFTER.
<u>LAST MINUTE</u>	\$100 WHEN BOOKING A SITTER WITH 4 HOURS NOTICE OR LESS. 20% GRATUITY ADDED TO TOTAL.
<u>EARLY START</u>	\$100 WHEN BOOKING A SITTER TO BEGIN BETWEEN 12 A.M. AND 6 A.M. 20% GRATUITY ADDED TO TOTAL.
<u>TIME ADJUSTMENT</u>	\$35 WHEN CHANGING THE START TIME WITHIN 24 HOURS OF RESERVATION

**FEES ARE SUBJECT TO CHANGE IF THE INFORMATION GIVEN AT THE TIME OF SCHEDULING THE RESERVATION IS DIFFERENT THAN AT THE TIME OF SERVICE.

GRATUITY

GRATUITY IS NOT INCLUDED FOR STANDARD RESERVATIONS AND SHOULD BE GIVEN TO THE SITTER DIRECTLY IN CASH OR ON THE CREDIT CARD RECEIPT PROVIDED AT THE END OF THE RESERVATION AND AT EACH CLIENTS DISCRETION. FOR GROUPS, HOLIDAYS, LAST MINUTE RESERVATIONS, EARLY START, AND RESERVATIONS ENDING AT 2AM OR LATER, 20% GRATUITY WILL AUTOMATICALLY BE ADDED TO THE TOTAL.

CANCELLATION AND MODIFICATION POLICY

THE FIRST HOUR OF SERVICES IS CHARGED UPON CONFIRMATION AND IS NOT REFUNDABLE AND NOT TRANSFERABLE. WE STRICTLY ENFORCE A 24 HOUR CANCELLATION AND MODIFICATION POLICY FOR ALL STANDARD BABYSITTING RESERVATIONS. THERE IS A 72 HOUR CANCELLATION AND MODIFICATION POLICY FOR RESERVATIONS WITH MULTIPLE BABYSITTERS, FOR GROUPS, SPECIAL RATES, OVERNIGHTS AND FOR HOLIDAYS. IF THE RESERVATION IS CANCELLED OR MODIFIED WITH LESS THAN THE REQUIRED 24 OR 72 HOURS NOTICE, THEN THE REMAINING BALANCE OF THE MINIMUM 4 HOURS WILL BE CHARGED TO THE CREDIT CARD PROVIDED AT THE TIME THE RESERVATION WAS MADE. CANCELLATIONS AND MODIFICATIONS MAY ONLY BE MADE BY SPEAKING WITH TBC DIRECTLY OR WITH A TIMED STAMPED VOICEMAIL. CANCELLATIONS OR MODIFICATIONS BY TEXT, BY EMAIL OR WITH THE BABYSITTER WILL NOT BE HONORED. **THERE ARE NO EXCEPTIONS.**

IMPERISSIBLE DIRECT CONTACT WITH BABYSITTER

CLIENT HERE ACKNOWLEDGES AND AGREES THAT HE/SHE SHALL NOT CONTACT THE BABYSITTER DIRECTLY FOR ANY REASON WHATSOEVER. CLIENT WILL BE ALLOWED AN INTRODUCTORY CALL TO MEET THE SITTER, BUT ALL OTHER CONTACT MUST BE MADE DIRECTLY THROUGH TBC. ADDITIONALLY, ALL RESERVATIONS MUST BE MADE DIRECTLY THROUGH TBC. IF A CLIENT VIOLATES THIS POLICY, THERE MAY BE AN ADDITIONAL SERVICE CHARGE THAT IS ADDED TO THE CLIENT'S BILL, AND THERE IS A POSSIBILITY THE RESERVATION MAY NOT BE FULFILLED. ADDITIONALLY, SITTER MAY RECEIVE REPRIMAND FOR SPEAKING DIRECTLY WITH THE CLIENT OR ALLOWING A RESERVATION TO BE BOOKED DIRECTLY WITH A SITTER.

THEBABYSITTINGCOMPANY.COM P (888) 407.7822 F (888) 371.6410

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RESERVATION REQUEST

TO MAKE A RESERVATION, COMPLETE A RESERVATION REQUEST IN ITS ENTIRETY. A CREDIT CARD IS REQUIRED FOR ALL RESERVATIONS. VISA, MASTERCARD, AND AMERICAN EXPRESS ARE ACCEPTED. NO CASH. FAX TO (888) 371.6410 OR E-MAIL TO RESERVATIONS@THEBABYSITTINGCOMPANY.COM. ONCE RECEIVED, RESERVATION WILL BE CONFIRMED BY PHONE AND/OR EMAIL.

FOR RESERVATIONS MADE AFTER NORMAL BUSINESS HOURS OR FOR LAST MINUTE REQUESTS, PLEASE CALL DIRECTLY AT (888) 407.7822.

CLIENT: _____ EMAIL (REQUIRED FOR E-RECEIPT): _____

CLIENT CELL PHONE: _____ ALTERNATE PHONE: _____

HOTEL / BUILDING NAME: _____ ROOM / UNIT: _____

RESERVATION NAME (AT HOTEL): _____

ADDRESS (STREET, CITY, STATE, ZIP): _____

EMERGENCY CONTACT NAME: _____ CELL PHONE: _____ RELATIONSHIP: _____

CHILD'S NAME: _____ AGE: _____ DOB: _____ SPECIAL NEEDS/ ALLERGIES: _____ M F

CHILD'S NAME: _____ AGE: _____ DOB: _____ SPECIAL NEEDS/ ALLERGIES: _____ M F

CHILD'S NAME: _____ AGE: _____ DOB: _____ SPECIAL NEEDS/ ALLERGIES: _____ M F

CHILD'S NAME: _____ AGE: _____ DOB: _____ SPECIAL NEEDS/ ALLERGIES: _____ M F

CHILD'S NAME: _____ AGE: _____ DOB: _____ SPECIAL NEEDS/ ALLERGIES: _____ M F

IS YOUR CHILD SICK OR GETTING OVER AN ILLNESS? : Y N IF YES, PLEASE EXPLAIN _____

LIST ALLERGIES OF ANYONE IN THE HOME / HOTEL ROOM THAT ARE NOT LISTED ABOVE: _____

PLEASE INCLUDE ALL DATE(S), START TIME(S) AND APPROXIMATE END TIME(S). IF ANTICIPATED RETURN IS AFTER 2AM PLEASE CHECK BOX BELOW.

RESERVATION 1 DAY/DATE: _____ START: _____ (AM/PM) END (APPOXIMATE): _____ RETURN AFTER 2AM: Y N

RESERVATION 2 DAY/DATE: _____ START: _____ (AM/PM) END (APPOXIMATE): _____ RETURN AFTER 2AM: Y N

RESERVATION 3 DAY/DATE: _____ START: _____ (AM/PM) END (APPOXIMATE): _____ RETURN AFTER 2AM: Y N

RESERVATION 4 DAY/DATE: _____ START: _____ (AM/PM) END (APPOXIMATE): _____ RETURN AFTER 2AM: Y N

RESERVATION 5 DAY/DATE: _____ START: _____ (AM/PM) END (APPOXIMATE): _____ RETURN AFTER 2AM: Y N

ADDITIONAL DATES/TIMES: _____

ARE CHILDREN SIBLINGS? Y N WILL SWIMMING BE REQUIRED: Y N

SITTER PREFERENCE: MALE FEMALE NO PREFERENCE

TELL US ABOUT YOUR IDEAL SITTER: _____

LANGUAGE PREFERENCE (ALL SITTERS SPEAK ENGLISH): _____ LIST PETS IN THE HOME / HOTEL ROOM: _____

SPECIAL REQUESTS / INSTRUCTIONS (PLEASE NOTIFY THE BABYSITTING COMPANY): _____

COMMENTS: _____

PRINTED NAME: _____ SIGNATURE: _____ DATE: _____

THEBABYSITTINGCOMPANY.COM P (888) 407.7822 F (888) 371.6410

New York City | The Hamptons | Boston | Washington D.C. | Philadelphia | Detroit | Chicago | South Florida | Orlando | Naples | Los Angeles
Orange County | San Diego | Portland | Seattle | Toronto

THE
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COMPANY

RESERVATION CONTRACT

PLEASE INITIAL EACH PROVISION INDICATING THAT YOU UNDERSTAND AND AGREE WITH THE FOLLOWING:

(_____) **SATISFACTION GUARANTEE**

IF FOR ANY REASON YOU ARE UNSATISFIED WITH YOUR SITTER AT ANY TIME DURING THE RESERVATION, PLEASE CALL THE BABYSITTING COMPANY IMMEDIATELY AND ALTERNATE ARRANGEMENTS WILL BE MADE TO MEET YOUR SATISFACTION.

(_____) **CANCELLATION AND MODIFICATION POLICY**

THE FIRST HOUR OF SERVICES IS CHARGED UPON CONFIRMATION AND IS NOT REFUNDABLE AND NOT TRANSFERABLE. WE STRICTLY ENFORCE A 24-HOUR CANCELLATION AND MODIFICATION POLICY FOR ALL STANDARD BABYSITTING RESERVATIONS. WE STRICTLY ENFORCE A 24 HOUR CANCELLATION AND MODIFICATION POLICY FOR ALL STANDARD BABYSITTING RESERVATIONS. THERE IS A 72 HOUR CANCELLATION AND MODIFICATION POLICY FOR RESERVATIONS WITH MULTIPLE BABYSITTERS, FOR GROUPS, SPECIAL RATES AND FOR HOLIDAYS. IF THE RESERVATION IS CANCELLED OR MODIFIED WITH LESS THAN THE REQUIRED 24 OR 72 HOURS NOTICE, THEN THE MINIMUM, 4 HOURS, WILL BE CHARGED TO THE CREDIT CARD PROVIDED AT THE TIME THE RESERVATION WAS MADE. CANCELLATIONS AND MODIFICATION MAY ONLY BE MADE BY SPEAKING WITH THE BABYSITTING COMPANY DIRECTLY OR WITH A TIMED STAMPED VOICEMAIL. CANCELLATIONS OR MODIFICATIONS BY TEXT, BY EMAIL OR WITH THE BABYSITTER WILL NOT BE HONORED. THERE ARE NO EXCEPTIONS.

ACKNOWLEDGEMENTS

(_____) CLIENT GIVES TBC PERMISSION TO RECOVER OUTSTANDING FEES FROM CREDIT CARD ACCOUNT INFORMATION HELD BY THE HOTEL, WHEN NECESSARY.

(_____) CLIENT ACKNOWLEDGES AND AGREES THAT IT SHALL NOT DIRECTLY CONTACT, HIRE OR RETAIN THE SERVICES OF SITTERS THAT ARE PRESENTED TO CLIENT BY TBC FOR BABYSITTING SERVICES OR ANY OTHER SERVICES, AND ALL CONTACT AND HIRING MUST BE MADE DIRECTLY THROUGH TBC.

(_____) CLIENT HAS BEEN PROVIDED WITH TBC'S RATES AND POLICIES AND HAS HAD AN OPPORTUNITY TO REVIEW THEM. CLIENT ACKNOWLEDGES AND AGREES TO ALL TBC'S POLICIES. CLIENT AGREES THAT TBC IS ONLY A REFERRAL SERVICE. ALL BABYSITTERS PROVIDED TO CLIENT ARE INDEPENDENT CONTRACTORS AND ARE NOT AGENTS, REPRESENTATIVES OR EMPLOYEES OF THE BABYSITTING COMPANY. CLIENT FURTHER ACKNOWLEDGES THAT ALL FEES ARE NON-REFUNDABLE UNDER ANY CIRCUMSTANCES INCLUDING WEATHER, ILLNESS OR ANY OTHER EMERGENCIES. THIS ACKNOWLEDGEMENT IS GOVERNED BY THE LAWS OF THE STATE OF FLORIDA. IN THE EVENT OF A DISPUTE, THE PARTIES UNCONDITIONALLY AGREE THAT THE COURTS IN AND FOR MIAMI-DADE COUNTY, FLORIDA SHALL BE THE EXCLUSIVE JURISDICTION TO RESOLVE ANY DISPUTES. FURTHERMORE, TBC SHALL BE ENTITLED TO RECOVER ITS REASONABLE ATTORNEY'S FEES AND THE COSTS OF ANY SUCH ACTION.

(_____) CLIENT HEREBY AGREES AND ACKNOWLEDGES THAT IT HAS RECEIVED THE CONTACT INFORMATION FOR TBC AND CLIENT UNDERSTANDS HOW TO CONTACT TBC AFTER HOURS BY CALLING THE AFTER-HOURS (24/7) PHONE NUMBER **888-407-7822** AND THAT THE EMAIL ADDRESS IS NOT MONITORED AFTER THE OFFICE CLOSSES.

(_____) I AUTHORIZE TBC TO CHARGE MY CREDIT CARD FOR BABYSITTING SERVICES, ADDITIONAL AGENCY FEES (WHEN APPLICABLE) AND PARKING CHARGES.

CARD NUMBER: _____ EXP DATE: _____ SECURITY CODE: _____

BILLING STREET ADDRESS: _____ CITY: _____

STATE: _____ COUNTRY: _____ POSTAL/ZIP CODE: _____

PRINTED NAME: _____

SIGNATURE: _____ DATE: _____

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