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. RESERVATIONS ARE BILLED FOR THE FULL TIME RESERVED.

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) 407-7822 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)  $45 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-REFUNDBABLE BOOKING FEE AND 20% GRATUITY ADDED TO THE TOTAL.
HOLIDAYS: NEW YEAR’S DAY*, VALENTINE’S DAY (AFTER 4PM)*, MARTIN LUTHER KING JR. DAY, PRESIDENTS DAY, GOOD FRIDAY, EASTER SUNDAY*, FIRST NIGHT OF PASSOVER, MOTHER’S DAY, MEMORIAL DAY*, FATHER’S DAY, JUNETEENTH, FOURTH 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
AGENCY FEE (YEARLY)  $100 COVERS ALL BOOKINGS THROUGH THE YEAR IN ALL CITIES. EXCLUDING HOLIDAYS. RESERVATIONS ARE SUBJECT TO AVAILABILITY.
AGENCY FEE (PER BOOKING)  $35 PER RESERVATION. EXCLUDING HOLIDAYS. RESERVATIONS ARE SUBJECT TO AVAILABILITY.
PARKING  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.
TOLLS  CLIENT IS RESPONSIBLE FOR ALL TOLLS
SICK CHILDREN  +$10 PER HOUR (FEBRUARY FEVER, RUNNY NOSE, COUGH, VOMITING, DIARRHEA, ETC.)
SPECIAL NEEDS  +$10 PER HOUR (ADD, ADHD, BI-POLAR, AUTISM OR ANY CONDITION REQUIRING EXTRA ASSISTANCE)
20% GRATUITY WILL BE ADDED TO RESERVATIONS ENDING AT 2 A.M. OR AFTER.
LATE MINUTE  $100 WHEN BOOKING A SITTER WITH 4 HOURS NOTICE OR LESS. 20% GRATUITY ADDED TO TOTAL.
EARLY START  $100 WHEN BOOKING A SITTER TO BEGIN BETWEEN 12 A.M. AND 6 A.M. 20% GRATUITY ADDED TO TOTAL.
TIME ADJUSTMENT  $35 WHEN CHANGES ARE MADE OR MODIFIED WITHIN 24 HOURS OF RESERVATION +$100 IF WITHIN 4 HOURS OF RESERVATION
AFTER HOURS FEE  $50 WHEN SCHEDULING, CONFIRMING, OR CANCELLING A RESERVATION AFTER NORMAL BUSINESS HOURS
**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 CLIENT’S 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.

IMPERMISSIBLE DIRECT CONTACT WITH SITTER
CLIENT SHALL NOT CONTACT THE SITTER DIRECTLY IN ANY WAY 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 WILL 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, SITTERS WILL RECEIVE REPRIMAND FOR SPEAKING DIRECTLY WITH THE CLIENT AND/OR ALLOWING A RESERVATION TO BE BOOKED DIRECTLY WITH A SITTER. IF COMPANY DETERMINES THAT CLIENT IS WORKING DIRECTLY WITH SITTER WITHOUT TBC, A PENALTY FEE OF UP TO $5,000.00, WHICH IS EQUIVALENT TO THE BUYOUT FEE, WILL BE CHARGED TO THE CLIENT BY THE COMPANY. CLIENT IS HEREBY ACKNOWLEDGING AND AUTHORIZING COMPANY TO CHARGE HIS/HER CREDIT CARD ON FILE FOR SUCH FEES.

CANCELLATION AND MODIFICATION POLICY
THE FIRST HOUR OF EACH INDIVIDUAL SERVICE AND BOOKING FEE/S AGENCY FEE(S) ARE CHARGED UPON CONFIRMATION. THIS DEPOSIT IS NOT REFUNDABLE AND NOT TRANSFERABLE FOR ANY DAY, TIME OR REASON. WE STRICTLY ENFORCE A 48-HOUR CANCELLATION AND MODIFICATION POLICY FOR ALL STANDARD BABYSITTING RESERVATIONS AND A 72-HOUR CANCELLATION AND MODIFICATION POLICY FOR RESERVATIONS WITH MULTIPLE BABYSITTERS, FOR GROUPS, SPECIAL RATES, OVERNIGHTS, TRAVEL, EARLY AND LATE STARTS AND FOR HOLIDAYS (NEW YEARS DAY, MARTIN LUTHER KING JR. DAY, VALENTINES DAY, PRESIDENTS DAY, FIRST NIGHT OF PASSOVER, GOOD FRIDAY, EASTER SUN, MOTHER’S DAY, FATHER’S DAY, JUNETEENTH, MEMORIAL DAY, FOURTH OF JULY, LABOR DAY, HALLOWEEN, VETERAN’S DAY, THANKSGIVING, CHRISTMAS EVE, CHRISTMAS DAY, AND NEW YEARS EVE). IF THE RESERVATION IS CANCELED OR MODIFIED WITH LESS THAN THE REQUIRED 48 OR 72 HOURS NOTICE, THE FULL REMAINING BALANCE OF THE SCHEDULED FEES 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 THE BABYSITTING COMPANY DIRECTLY OR WITH A TIME STAMPED VOICEMAIL. CANCELLATIONS AND/OR MODIFICATIONS BY TEXT, BY EMAIL AND/OR DIRECTLY WITH THE BABYSITTER WILL NOT BE HONORED. MODIFICATIONS MADE WITHIN 24 HOURS OF A RESERVATION OR AFTER HOURS WILL INCUR AN ADDITIONAL FEE. THERE ARE NO EXCEPTIONS.

New York City | The Hamptons | South Florida | Orlando | Naples | Tampa | Boston | Washington D.C. | Philadelphia | Atlanta | Detroit | Cleveland
Milwaukee | Chicago | Dallas | Austin | San Antonio | Los Angeles | Orange County | San Francisco | Seattle

THEBABYSITTINGCOMPANY.COM  P (888)407-7822  F (888)407-7822
RESERVATION REQUEST

REFERRED BY: ______________________

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) 407-7822 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: __________

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

RESERVATION NAME (AT HOTEL):
________________________________________________________________________

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: __________ (AM/PM) RETURN AFTER 2AM: ☐ Y ☐ N

RESERVATION 2 DAY/DATE: ______________________ START: __________ (AM/PM) END: __________ (AM/PM) RETURN AFTER 2AM: ☐ Y ☐ N

RESERVATION 3 DAY/DATE: ______________________ START: __________ (AM/PM) END: __________ (AM/PM) RETURN AFTER 2AM: ☐ Y ☐ N

RESERVATION 4 DAY/DATE: ______________________ START: __________ (AM/PM) END: __________ (AM/PM) RETURN AFTER 2AM: ☐ Y ☐ N

RESERVATION 5 DAY/DATE: ______________________ START: __________ (AM/PM) END: __________ (AM/PM) RETURN AFTER 2AM: ☐ Y ☐ N

ADDITIONAL DATES/TIMES: __________________________________________________

ARE CHILDREN SIBLINGS? ☐ Y ☐ N WILL SWIMMING BE REQUIRED: ☐ Y ☐ N SITTER PREFERENCE: ☐ MALE ☐ FEMALE ☐ NO PREFERENCES

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: __________________________________________________________________
__________________________________________ SIGNATURE: __________________________ DATE: ______________________

AGENCY FEE (MUST CHECK ONE):
☐ $100 ANNUAL BOOKING COVERS ALL RESERVATIONS FOR ONE YEAR, EXCLUDING HOLIDAYS, LAST MINUTE AND AFTER HOURS RESERVATIONS
☐ $35 PER RESERVATION APPLIES FOR EACH RESERVATION, EXCLUDING HOLIDAYS, LAST MINUTE AND AFTER HOURS RESERVATIONS

PRINTED NAME: _____________________________ SIGNATURE: __________________________ DATE: ______________________

THEBABYSITTINGCOMPANY.COM P (888)407-7822 F (888)407-7822

New York City | The Hamptons | South Florida | Orlando | Naples | Tampa | Boston | Washington D.C. | Philadelphia | Atlanta | Detroit | Cleveland | Milwaukee | Chicago | Dallas | Austin | San Antonio | Los Angeles | Orange County | San Francisco | Seattle
RESERVATION CONTRACT AND ACKNOWLEDGEMENTS

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

(_________) 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.

(_________) ACKNOWLEDGMENT OF RATES, FEES, AND PENALTIES
Client has been provided with TBC’s rates and policies has had an opportunity to review them. Client acknowledges and agrees to all of TBC’s fees and policies, including any penalty fees. Client agrees TBC is only a referral service. All sitters provided to client are independent contractors and are not agents, representatives, or employees of TBC. Client further acknowledges and agrees 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 agrees 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 attorneys’ fees and costs of any such action.

(_________) CLIENT AUTHORIZES TBC TO CHARGE MY CREDIT CARD FOR SITTING SERVICES, PARKING FEES, AND/OR ADDITIONAL AGENCY FEES AND/OR RECOVER OUTSTANDING FEES FROM CREDIT CARD ACCOUNT INFORMATION HELD BY THE HOTEL (WHEN APPLICABLE).

(_________) CANCELLATION AND MODIFICATION POLICY
The first hour of each individual service and booking fee(s)/agency fee(s) are charged upon confirmation. This deposit is not refundable and not transferable for any day, time or reason. We strictly enforce a 48-hour cancellation and modification policy for all standard babysitting reservations and a 72-hour cancellation and modification policy for reservations with multiple babysitters, for groups, special rates, overnights, travel, early and late starts and for holidays (New Years Day, Martin Luther King Jr. Day, Valentine’s Day, President’s Day, First Night of Passover, Good Friday, Easter Sunday, Mother’s Day, Father’s Day, Juneteenth, Memorial Day, Fourth of July, Labor Day, Halloween, Veteran’s Day, Thanksgiving, Christmas Eve, Christmas Day, and New Years Eve). If the reservation is canceled or modified with less than the required 48 or 72 hours notice, the full remaining balance of the scheduled 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 the babysitting company directly or with a timed stamped voicemail. Cancellations and/or modifications by text, by email and/or directly with the babysitter will not be honored. Modifications made within 24 hours of a reservation or after hours will incur an additional fee. THERE ARE NO EXCEPTIONS.

(_________) IMPERMISSIBLE CONTACT WITH SITTERS
Client acknowledges and agrees that it shall not directly contact sitter, hire or retain the services of sitters that are presented to client by TBC for sitting services or any other services. Contact and hiring must be made directly through TBC. Client may not share sitters contact information with any third party. If client violates this provision and directly contacts, hires, retains, or shares the services and or contact information of sitter without TBC, client is agreeing to be charged a penalty of up to $5,000.00, and hereby authorizes the use of the credit card on file for these charges.

(_________) COMPANY CONTACT INFORMATION
Client acknowledges and agrees 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 emails are not monitored after the office closes.

CARD NUMBER:______________________________________________________EXP DATE: ______________ SECURITY CODE: ______________
BILLING STREET ADDRESS:___________________________________________________________________________CITY:________________
STATE:_________________________________ COUNTRY:____________________ POSTAL/ZIP CODE:__________
PRINTED NAME:_______________________________________________________________________________________________________
SIGNATURE:____________________________________________________________________  DATE:____________________________