Texas Dept of Family
and Protective Services

REGISTERED FAMILY HOME CAREGIVER/PARENT AGREEMENT

Form 7242
March 2004

Caregiver	Telephone No.
Address	

AGREEMENT

I, _____ , agree that _____,
(Parent) (Caregiver)

will care for _____.
(Children)

beginning on_____, _____, _____.
(month) (day) (year)

Care will include the following meals and snacks:

☐ Breakfast ☐ Morning Snack ☐ Lunch ☐ Afternoon Snack ☐ Supper

I will pay a ☐ Weekly ☐ Monthly fee of $_____. Payment is due in advance on _____.

If this fee is not paid by that day, a penalty of $_____ will be charged, or my child must be withdrawn from care.

My children will be in care between the hours of _____ and _____ on _____.
(time to arrive) (time to leave) (days)

Care outside of these hours will require an additional fee of $_____ for each _____ minutes, which will be paid the same day.

When I withdraw my child(ren) from care, I will give at least _____ weeks advance notice.

_____ _____
Signature-Parent Date

_____ _____
Signature-Caregiver Date