In-Room Hotel Child Care Referral Service
Provided by
Child Care Professionals, LLC
Trusted Child Care Specialists since 1985
Tracie D. Hoffman, President

For complete Agency Information, please:
Visit: www.childcareprofessionals.com
Phone: 513.561.4810
Fax: 513.272.1714
Email: thoffman@childcareprofessionals.com

When you are out of town, your hotel becomes home to your family. Our Child Care Providers are familiar with age appropriate activities for children that can help make their stay more enjoyable. Child Care Professionals, Inc. recruits and refers providers with educational background and experience in the child care field. Many providers have raised children of their own or are college students majoring in education. The referral service attracts providers who are professional, well spoken, non-smoking, experienced and interested in caring for children.

Child Care Professionals, LLC:
- Personally interviews each provider
- Requires current Infant and Child CPR coursework
- Contacts work and personal references
- Processes security checks for state convictions and driving records

The Process: 48 hours advance notice is preferred.
- Simply download the application from the website and either fax, email or mail it to the office
- Phone the office with any questions
- You will be notified of providers
- The provider(s) will contact you directly to confirm all arrangements

The Fees: Hotel care requires a 4-hour minimum.
- An Agency fee of $25 per day per child care provider is charged to your Master Card or Visa at the time the request is confirmed, even if the request is later cancelled.
- Provider fees are $15 per hour. Payment for the provider is paid directly to the provider that day. Compensation for parking, entertainment, and meals is the responsibility of the family.
- If there are more than 3 young children in need of child care from one or more families, a second provider is required.

Professional Affiliations: Alliance of Professional Nanny Agencies, International Nanny Association, recipient of National Agency of the Year Award.
**HOTEL CARE REGISTRATION FORM**

Responsible Party Name: ___________________________________ Date: __________________________

Credit Card: Master Card____Visa____

(Note – if business card, list bus. Address)

Name on card: __________________________________

Card number: ______________________________

Expiration date: ______________________________

Home Address: ______________________________________________________________________

City, State, Zip Code: _________________________________________________________________

Business address (optional): ___________________________________________________________

Home phone: __________________ Work Phone: ______________ Cell: _______________________

Hotel Name: __________________________________________ Room Number: ________________

Hotel Address: ________________________________________ Phone: _________________________

Expected arrival date and time: ________________________________________________________

Care needed, dates and times: _________________________________________________________

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<tr>
<th>Name of Child</th>
<th>Birth date</th>
<th>M/F</th>
<th>Special Needs, likes, dislikes</th>
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**Please add an attachment for additional children, parent information, expectations, notes**

**PLACEMENT AGREEMENT**

**Relationship of Child Care Professionals, LLC hereafter referred to as CCPL and Provider:**

CCPI is not the employer of the Providers it places. The Provider chosen by parent becomes the independent contractor of Parent. Parent and Provider define the duties to be performed. They negotiate the final compensation. CCPI will suggest compensation guidelines based on the education and experience qualifications of the Provider selected by Parent.

CCPI is not liable for any losses, liabilities, damages, costs or expenses which may be incurred as a result of the relationship entered into between care provider and my child. Parent hereby indemnifies and holds harmless CCPI against all losses, liabilities, damages, costs and expenses (including attorneys’ fees) which may be sustained by CCPL based on or arising from the employment arrangements entered between Parent and Provider or the performance of services by CCPL hereunder.

**Consideration for Services Provided:**

CCPL’s fees for temporary/occasional placement for positions by the day, evening, overnight, etc. will be charged to Parent by credit card when a job order is processed. Fees are per current fee schedule and are refunded only if the candidate is unable to fulfill the commitment and a replacement cannot be found.

All registration information is accurate without omissions of any kind. I understand the placement agreement and my responsibilities with Child Care Professionals, LLC. IN WITNESS WHEREOF, CCPL and Parent have signed this agreement on this ___day of ______________, _______.

Child Care Professionals, LLC: ____________________________

Parent: ____________________________
Please return completed form via: Fax: 513.272.1714
Email: thoffman@childcareprofessionals.com  Mail: 3524 Edwards Road  Cincinnati, OH 45208