

Loving Care for Newborns LLC.

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PROFESSIONAL BABY NURSE SERVICES CONTRACT

1. This Contract agreement is made between: _____ (hereafter referred to as "CLIENT"), residing at _____ and _____ (hereafter referred to as "BABY NURSE"). EFFECTIVE DATES

2. Client agrees to retain Baby Nurse services commencing at _____ (am/ pm) on the _____ day of _____, 2023 and ending at (am/pm) on the _____ day of _____, 2023 .

3. This contract date (as opposed to the services date) is _____ 2023 BABY NURSE SERVICES

BABY NURSE SERVI

4. CLIENT, being the authorized parent and/or guardian of an infant, hereby employs BABY NURSE, for the sole and limited purpose of providing all necessary and appropriate INFANT BABY NURSING CARE, for the infant (named: _____, age _____).

5. The term "infant childcare including

A. Total nursing care, as practiced and understood within the U.S. nursing care community related to children deemed infants'

B. Umbilical cord and circumcision care.

C. Creating and maintaining a safe and healthy nursing care environment.

D. Employing appropriate Burping techniques.

E. Providing lactation support

F. Baby laundry and sanitation care services, and G. Providing client with infant care nursing advice.

6. CLIENT understands that should such ancillary serviced become necessary, that Client is responsible for payment of said services and that payment to Baby nurse does not cover said expenses. Such ancillary services included, but is not limited to purchasing supplies, emergency transportation, emergency medical care, clothing, facilities cost, etc.

7. CLIENT will reimburse Baby Nurse for any “out of pocket” payment paid to engage any ancillary and necessary services, obtained on Client’s and/or baby’s behalf or for any necessary baby accessories or equipment that the baby nurse deems essential and is requested to purchase by Client.

TERMS OF PAYMENT

8. Client agrees to compensate baby nurse at the rate of: \$ _____ per hour.

9. CLIENT agrees to pay Baby Nurse the agreed amount on _

10. CLIENT agrees to pay an advance of two weeks payment in advance to hold the dates requested.

11. In the alternative, that the parties agree to an “hourly “rate, Baby Nurse will be compensated at the rate of _____dollars, per hour.

12. Any hours worked in excess of the contracted period, above, will be paid at the rate of _____dollars per (hour/day), payable at the end of the last hour worked.

13. CLIENT will compensate Baby Nurse “Double time” rates, should nursing care services be required on the national holidays of New Years, Martin Luther King Day, President’s Day, Easter, Memorial Day, Independence Day, Labor Day, Thanksgiving Day and Christmas Day.

14. BABY NURSE agrees to exert her best efforts, always, on behalf of client and child, which adhering to the highest ethical and professional standards.

15. BABY NURSE warrants that she is professionally qualified and experienced in the delivery of the professional services covered by this agreement.

MUTUAL CONVENANT

16. CLIENT warrants that client has disclosed all relevant and material medical information and “special needs” as such is relevant to the care, custody and control of the infants and the services covered by this agreement.

17. CLIENT covenants to provide adequate and reasonably comfortable accommodations for Baby Nurse and meals.

18. CLIENT and/or BABY NURSE will make a good faith effort to resolve any substantial reasonable misunderstanding, related to the contracted services, prior to the aggrieved party communicating such dispute to any other third-party persons or terminating the services of the baby nurse. a. Client consents to notify Baby Nurse, in writing.

20. CLIENT agrees to conduct himself / herself with due regard of the BABY NURSE and agrees that he / she will not do or commit any act or thing that will degrade the BABY NURSE or that will tend to shock, insult or offend the BABY NURSE. If in the BABY NURSE’S sole discretion, the CLIENT behaves in an inappropriate manner; the BABY NURSE may terminate this agreement immediately.

CLIENT, by signing this agreement, indicates that client has read, discussed, understands and agrees to be bound to all conditions herein.

DATED; _____, 2023 _____

_____ PRINT CLIENT'S NAME PRINT

BABY NURSE'S NAME _____

Signature _____ Signature _____