

Babysitter Information

Child and Babysitting Safety

Babysitter's Name _____

Phone _____ Email _____

This is my babysitting rate for your family: _____

Relevant medical information I want to share (example: allergies, food intolerances, diabetes, asthma, etc.):

Contact if I get sick while babysitting:

Name _____ Phone _____

Relationship to Babysitter _____

Name _____ Phone _____

Relationship to Babysitter _____