

Individual Transportation Contract

Childs' Name	D.O.B	Telephone
Address	City	Zip

This Contract is for:

Single Rides - (Two rides or less per week)

☐ Single Ride ☐ One Way

Weekly Rate - one way transportation

☐ Round Trip ☐ Weekly _____

Monthly Rate - one way transportation

☐ Monthly _____ ☐ Other

Monthly Round trip

To or From _____ times per day, _____ days per week

To or From _____ times per day, _____ days per week

Parent or Guardian Name: (Please Print)	Official Use CC# _____ EXP: _____ CWV: _____ MILEAGE _____ RATE: _____
Address	
Phone Work Mobile	
Email:	

Schedule of Fees

Enrollment Fee - \$25.00 PER CHILD

Single Rides - First payment due upon signed contract. (Payments are due two days before ride)

Weekly Fee - First payment due upon signed contract. (Payments are due the Monday of the week of service)

Monthly Fee - First payment due upon signed service contract. (Payments are due the first of each month)

Late Fees \$25.00 Cancellation Charges - A\$15.00 fee will be charged (for late payments, location change, no show or no call) (_____) initial

Service Date _____ Payment type: ☐ Cash ☐ Check ☐ Credit

Enrollment Fee: _____

Agreement between parent (parent name) _____ and Kiddie KABZ LLC on _____

The parties agree to the above schedule of fees and safety policy.

I attest that the above information is true and correct.

Parent Name (Print)	Parent Name (Signature)	Date
Emergency Contact	Address	Phone
Emergency Contact	Address	Phone