

Private Arrangement Acknowledgement Form

Name of Educator:
Name of Child/ren:
Date of Private Arrangement:/
Time of Private Arrangement:: (am / pm): (am / pm)
I understand that the time identified on this acknowledgement form is a private arrangement between myself (parent / guardian) and the FDC Educator. I also understand that this is not recognised as a formal booking and therefore will not be financially compensating the Educator.
I acknowledge that during this time the Educator is not required to comply with the Clarence Family Day Care Scheme Policies and Procedures and the Education and Care Services National Law Act 2010 and the Education and Care Services National Regulations.
Name of Parent / Guardian:/ Date://
Signature of Parent / Guardian:
Educator / Office Use Only
Educator Purpose for Private Arrangement:
Educator Signature: Date Office Notified:/