

Tutoring Contract

This agreement is made between the following Tutor and Client(s).

Client:				
Phone:	Cell:			Home:
Home Address:				
Parent/Guardian/Agency: (Primary Contact Person)				
Phone:	Cell:			Home:
Home Address:				
Preferred Contac	t Method:	_Text	_Email _	home phonecell phone
Parent/Guardian/Agency: (Alternate Contact Person)				
Phone:	Cell:			Home:
Home Address:				
Preferred Contac	t Method:	_Text	_Email _	home phonecell phone
Tutoring, beginning on the day of, 20_, and continuing				
thereafter at the following days and hours				
shall be provided in the following subject(s):				
at the following address:				

FEES & PAYMENT (Select the best scenario)

My rate for tutoring is \$ _____ per one : one session or \$ _____ per small group

session for tutoring, testing, and report writing. I agree to pay ____weekly ____ monthly.

Accepted method of payment are Zelle, cash, or check. While the Tutor understands that the Client may forget the means of payment, no tutoring will be available until the previous session's payment has been made.

LATENESS, CANCELLATIONS, and NO SHOWS

The lateness and cancellation policy has been created to be fair to the Client and Tutor, as well as other students who may be scheduled the same day as the Student.

Lateness

No adjustment of fees or schedule shall be made for time lost because of late arrival or early departure by the Student.

In addition, a student who is picked up late more than once will be subject to additional fees for the extended time according to the normal hourly rate.

Cancellations

Client agrees to let the Tutor know of cancellations by phone, text, or email at least 24 hours before the scheduled session, whenever possible. If the Client cancels before the scheduled session more than once, the Client will be charged for the session. Same day cancellations should be made by text or phone call.

No-Shows

If a session is missed without prior notification (No-Show), Client will be charged the full hourly rate for the missed session. Client agrees to let the tutor know within 24 hours that the following appointment will be kept.

We agree with the policies in this contract.

(Tutor Signature)

(Date)

(Client / Representative Signature)

(Date)