

## PROTECT.VIP CHILD SAFETY MONITORING AGREEMENT

Agent Name: \_\_\_\_\_

Agent Email: \_\_\_\_\_

Client Name: \_\_\_\_\_

Client Contact Information: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

I, the undersigned, hereby agree to the terms and conditions outlined by PROTECT.VIP for the child safety monitoring services. I understand and accept the following terms:

**Verification of Children:** PROTECT.VIP will only monitor children who are verified by a valid birth certificate provided by the client. We do not provide services for children other than those directly related to the client.

**Observation and Reporting:** PROTECT.VIP will observe and report on the child's activities from a distance, as assigned by the client. We do not have physical contact with the child or interfere with their daily routines.

**No Accountability for Incidents:** As PROTECT.VIP provides these services free of charge, we are not to be held accountable for any incidents, accidents, or harm that may occur to the monitored child during the monitoring period. We do not have any legal responsibility for the child's safety or well-being.

I have read and understood the terms and conditions outlined in this agreement, and I voluntarily consent to the child safety monitoring services provided by PROTECT.VIP under these conditions.

Client's Signature: \_\_\_\_\_

Date: \_\_\_\_\_ Phone: \_\_\_\_\_