

INITIAL CLIENT INQUIRY
Baby Sitting – ELDERLY CARE - NANNY SERVICE – Cleaning/Ironing

Please indicate Service required:	<u>Baby Sitting</u> <u>ELDERLY CARE</u> <u>NANNY SERVICE</u> <u>Cleaning/Ironing</u>						
	Yes No	Yes No Yes No Yes No					
CLIENT NAME:		CLIENT CRN No. If applicable					
SPOUSE'S NAME:							
ADDRESS:							
		Post Code:					
CONTACT DETAILS:	Tel (Hm):	Tel (Bus.):					
	Mob:	Other:					
	Email:						
ELDERLY CARE and MONITORING	Your relative requiring care: Age: Type of care require:						
CHILDREN'S DETAILS: NO. OF CHILDREN REQUIRING CARE (Include all children)	Full Name:	M/F	DOB	CRN No. if required			
CLEANING and IRONING: at the same time:	Apartment or House 1 or 2 stories	Wkly Ftly	Hours required	Duties required			
DAYS REQUIRED (indicate with X):	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
HOURS REQUIRED:	From (AM / PM)			To (AM / PM)			
ANY OTHER REQUIREMENTS:							
WORK STATUS:	Casual Yes/No		Temporary Yes/No (less than 6 months)		Permanent Yes/No (more than 6 months)		
COMMENCEMENT DATE:							
SALARY Proposed: (optional)							
PERMANENT NANNY Placement Fee	Our Placement Fee is 6% of Annual Gross Income plus G.S.T. Based on 30/40 hrs p/wk or Casual to 30 hrs p/wk. \$1000.00 incl. payable within 14 DAYS :- by Cheque/Credit Card plus card fees. A work place agreement between Client and Nanny must also be negotiated and signed by both parties.						
NOTES							



ABRACADABRA BRIGHTON DOMESTIC AGENCIES PTY LTD

Suite 9. 214 BAY STREET, BRIGHTON VIC 3186

Tel 9592 5161 - 0448 4 NANNY | Fax: 9503 0226 | Email: abrabrighton@hotmail.com

www.abrabrighton.com.au