



La Relève
du Haut-Saint-François
NOTRE ORGANISME FAMILLE

BANK OF BABYSITTERS
LA RELÈVE DU HAUT-SAINT-FRANÇOIS

Name : _____

Date of birth : _____

Address : _____

Home Phone : _____

Cell : _____

Languages spoken : French English Other

Section to be completed by the babysitter's parent, the babysitter's guardian, or the
babysitter (if age of majority):

I _____ (*name of adult*) authorize La Relève to share my
child _____'s (*name of child*) contact information to families of Haut-
Saint-François actively seeking a babysitter.

Signature : _____

Date : _____

*La Relève acts as a **point of contact** for babysitters and families seeking babysitters.

The organization disclaims all responsibility for the agreement between the babysitter and
families, the quality of the caretaking, and/or contact thereof.

La Relève does not provide references for caregivers, it only makes the list of babysitters
available to families in Haut-Saint-François seeking contact information of available
babysitters.