**SCHEDULE 4**

**PARTIES AND SIGNATORIES TO THE AGREEMENT**

1. This Agreement is made on the       day of       20      between:

|  |  |
| --- | --- |
| **Name of Provider:** *(Registered Legal Entity)*  |       |
| **Registered business** **address**  |       |
| **Registered Company** **Number / Registered Charity Number:** |       |

**And**

|  |  |
| --- | --- |
| **Name of Contracting Authority:**  |       |
| **Local Authority / Children’s Trust / Other**  |  |
| **Address:**  |       |

1. Signatories to the Agreement



**Duly Authorised Signatory on behalf of the Provider**

Signed by: (PLEASE PRINT NAME)

|  |
| --- |
|  |

Designation: (PLEASE PRINT)

|  |
| --- |
|  |

Signature: Dated:

|  |  |
| --- | --- |
|  |  |

In the presence of: (PLEASE PRINT NAME)

|  |
| --- |
|  |

Designation: (PLEASE PRINT)

|  |
| --- |
|  |

Signature: Dated:

|  |  |
| --- | --- |
|  |  |

**Duly Authorised Signatory on behalf of the Contracting Authority**

Signed by: (PLEASE PRINT NAME)

|  |
| --- |
|  |

Designation: (PLEASE PRINT)

|  |
| --- |
|  |

Signature: Dated:

|  |  |
| --- | --- |
|  |  |

In the presence of: (PLEASE PRINT NAME)

|  |
| --- |
|  |

Designation: (PLEASE PRINT)

|  |
| --- |
|  |

Signature: Dated:

|  |  |
| --- | --- |
|  |  |