

Client Service Agreement

Effective Date: [Insert Date]

Between:

[Service Provider Name]
[Service Provider Address]
[City, State, Zip Code]
[Phone Number]

And:

[Client Name]
[Client Address]
[City, State, Zip Code]
[Phone Number]

1. Purpose

This agreement outlines the terms and conditions for the provision of social services to the client.

2. Services Provided

The services to be provided include, but are not limited to:

- [Service 1]
- [Service 2]
- [Service 3]

3. Duration

This agreement will commence on the effective date and will continue until [Insert End Date] or until terminated by either party.

4. Payment Terms

The client agrees to pay [Insert Payment Amount] for the services rendered.

5. Confidentiality

Both parties agree to uphold the confidentiality of the information shared during the course of this agreement.

6. Termination

Either party may terminate this agreement with [Insert Notice Period] notice.

Signatures

[Service Provider Name]
[Title]

[Client Name]