



# Client Agreement

## Daily Charge Rate

For the purposes of the Client Agreement to be entered into between:

**Medical Travel Companions Pty Ltd (ACN: 167 565 577)** of UGF, 183 Melbourne Street, North Adelaide SA 5006 South Australia (hereafter called "MTC")

**and**

Client Name:

(hereafter called "the Client")

**and (if applicable)**

(Only include if the travel companion is an independent contractor of MTC):

Travel companion:

ABN:

For the purposes of the Client Agreement, MTC has quoted the Client charge daily pay rate of:

MTC Service Level:

AUD\$

per day (plus GST)

Number of Days:

Total Companion cost for journey: AUD\$

(plus GST, plus travel expenses)

If the Travel Companion will be required to work longer than 12 continuous hours without a minimum 8 hour break (other than long-haul international air travel), the additional charges are:

**The Client agrees to the Client charge daily pay rate quoted above.**

**Signed by the Client:**

Date:

**Don't forget. As the client I have read and accept the terms and conditions and client agreement and understand that I will need to contact MTC should I have further requirements.**