

AGREEMENT

THIS AGREEMENT is made and entered into this ____ day of _____, 202 by and between **Hopkins County Board of Education, 320 S. Seminary Street, Madisonville, KY 42431** and **Webster County Board of Education** of 28 State Route 1340, Dixon, KY 42409.

The Hopkins County Board of Education agreed and was appointed by the Superintendent of Hopkins County Schools for the **2023-2024** school year to contract physical therapy services for **80 days** (*which includes one holiday*), 50% of fringe benefits including but not limited to any costs the Webster County Board of Education incurs for retirement, health insurance and vision insurance, and 50% of professional learning cost from Webster County Schools. The Hopkins County Board of Education will be billed at a daily rate of **\$342.24** for **80** days, total of **\$27, 379.20 plus 50% of fringe benefits and 50% of professional learning cost.**

The Hopkins County Board of Education hereunder shall hold harmless the Webster County Board of Education for any and all injuries to third parties from the discharge or failure to properly discharge any duties implied by the services to the provided hereunder.

Notwithstanding the date of execution hereof, this Agreement shall be deemed effective from **July 1, 2023, or once contract is signed.**

This contract may be cancelled by either party upon thirty (30) days written notice.

Amy Smith, Superintendent
Hopkins County Board of Education

Date

Aaron Harrell, Superintendent
Webster County Board of Education

Date