

# Village Glen Tennis Club - Child Care Registration/Release Form

Member?    YES    NO

*The Child Care Facility is to be used only while parent/guardian is on site.*

Child #1 Name: \_\_\_\_\_ Sex: M / F                      Age \_\_\_\_\_

Child #2 Name: \_\_\_\_\_ Sex: M / F                      Age \_\_\_\_\_

Child #3 Name: \_\_\_\_\_ Sex: M / F                      Age \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Parent Names: \_\_\_\_\_

Phone #s: Home: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_

Person(s) authorized to pick up child(ren): \_\_\_\_\_

**In case of emergency, we will get parent from facility. If not found on site, we will call the following person:**

Name: \_\_\_\_\_ Relationship to child: \_\_\_\_\_

Phone #s: Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

Medical conditions/information: \_\_\_\_\_

Name of Physician: \_\_\_\_\_ Phone: \_\_\_\_\_

**ALLERGIES?            YES\_\_\_ NO\_\_\_ If yes, please list\_\_\_\_\_**

**\*Please Note: Service providers are NOT authorized to administer any medications. Child's immunizations must be up to date.**

## Child Care Liability and Release Waiver

Our facility *is not* a licensed child care facility. The Village Glen Tennis facility offers only basic babysitting services while you make use of the facility. We cannot and will not offer any medical services of any kind, including the administration of any medications. If your child needs any type of special services, please do not leave your child with the facilities' babysitters. In case of any emergency, you will be notified immediately by the staff and you must take all appropriate actions to address the situation yourself. Your signature below acknowledges receipt and agreement with this information and that in consideration for the use of the babysitting services offered by the facility(s), you hereby waive and release, on behalf of yourself and your child, the facility, its owners, officers, managers, independent contractors and employees from any and all claims and actions you may have resulting from any injury that may occur while your child is in the care of the facility's babysitters. The undersigned further understands that personal injuries occasionally occur to children while in the care of others, but knowing of such risk and in consideration of the services provided, the undersigned hereby agrees to assume those risks, hold harmless, release and indemnify Village Glen Tennis Club for all expenses, including attorney costs and fees. I hereby warrant that, to the best of my knowledge, my child is in good health, and I assume all responsibility for his/her health and well-being.

\_\_\_\_\_  
Parent/Guardian Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date