

Enrollment Form

Which session(s) will your child(ren) be attending?

___ **Friday 5pm-11pm** on June 12, 2015

___ **Saturday 7pm-11pm** on June 13, 2015

If your child(ren) is going to be absent or late, please call in advance. If your child(ren) is going to be picked up late, please make every effort to contact the provider. A late pick up fee of \$25 will be charged if they are picked up more than 30 minutes late.

Child No. 1 _____ Age _____

Nickname _____ DOB _____

Child No. 2 _____ Age _____

Nickname _____ DOB _____

Child No. 3 _____ Age _____

Nickname _____ DOB _____

Child No. 4 _____ Age _____

Nickname _____ DOB _____

Parent Information:

Parent/Guardian No. 1 (required)

Name: _____

Home Phone _____ Cell Phone _____

Address: _____

Parent/Guardian No. 2 (opt.)

Name: _____

Home Phone _____ Cell Phone _____

Address: _____

Child Information:

Are there any food restrictions?

Are there any recent traumatic situations the child(ren) has been exposed to such as a death in the family, divorce, etc.?

How is your child(ren) used to being disciplined?

What are your child(ren)'s favorite activities or games?

Does your child(ren) have any speech, hearing, visual, or cognitive problems?

How does your child normally behave in group activities? Leader, bossy, left out?

Are there any other comments or information you would like me to know?

Any specific concerns?

Health Information:

Does your child(ren) have any known allergies? Please specify, with names.

Does your child(ren) have any medical conditions we should be aware of? Please specify, with names.

Emergency Contacts:

Emergency Contact No. 1 (required)

In an emergency, parents/guardians will always be contacted first if possible.

Name _____ Relation _____

Home Phone _____ Cell Phone _____

Emergency Contact No. 2 (opt.)

In an emergency, parents/guardians will always be contacted first if possible.

Name _____ Relation _____

Home Phone _____ Cell Phone _____

Participant Release and Assumption of Risk:

In consideration of the child(ren_ listed on the first page of this document being permitted to participate in activities and to use provided equipment and facilities, I release and agree to indemnify and hold harmless Lisa the Great to the fullest extent permitted by law, from any and all liability, claims which are brought by, or on behalf of the child(ren), even if such liability arises from the active or passive negligence of Lisa.

I acknowledge that my child(ren)'s participation in individual and group activities, physical activity such as running, and the use of play-safe foam weapons entails known and unanticipated risks that could result in physical or emotional injury or death. I understand that such risks cannot reasonably be eliminated.

The risks include, among other things: the hazards of slips, falls, scrapes, bumps, and bruises; the hazards from improper use of equipment; my child(ren)'s own physical condition, and the physical exertion associated with this activity.

Furthermore, Lisa and staff have demanding jobs to perform. They seek safety, but they are not infallible and among other things

- (1) they might be unaware of a participant's fitness or abilities,
- (2) they might misjudge the weather or other environmental conditions,
- (3) they may give incomplete or inaccurate instructions or warnings,
- and (4) equipment being used might malfunction.

Notwithstanding anything to the contrary herein, I agree that if any portion of this agreement is found to be void or unenforceable, the remaining document shall remain in full force and effect. I agree that a digitally reproduced/scanned version of this waiver is fully valid and representative of the original, signed executed copy.

Parent or Legal Guardian: _____

Signature _____ Today's Date: ____/____/____