



BABYSITTING REGISTRATION/RELEASE FORM

Parent/Guardian Member Name: _____
Address: _____
Home Telephone: _____ Cell Phone: _____

1st Child's Information:

Name: _____ Date of Birth: _____
Allergies: _____ Special Instructions: _____
Toilet Trained? N / Y Use Toilet Alone? N / Y

2nd Child's Information:

Name: _____ Date of Birth: _____
Allergies: _____ Special Instructions: _____
Toilet Trained? N / Y Use Toilet Alone? N / Y

Emergency Contact:

Name: _____ Relationship to Child : _____
Telephone: _____

Babysitting Policies and Procedures:

- * Parent/guardian agrees to adhere to check-in/check-out procedures; children will be released ONLY to the person who dropped them off;
 - * Parent/guardian will not leave JABS premises at any time while their child is under JABS babysitting care;
 - * Maximum time allowed per day – 2 ½ hours;
 - * For the well-being of the other children, do not bring sick children into babysitting area;
 - * Please label all of your child's belongings with their name;
 - * No outside food, drink or toys/playthings permitted, for safety and hygienic reasons;
 - * Disruptive or inappropriate behavior will not be tolerated; parent will be informed immediately and asked to remove their child from the babysitting room;
 - * If a child is inconsolable for more than 15 minutes, parents will be informed and asked to return to the babysitting area to assist staff;
 - * Medications will not be administered by babysitting staff;
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I, the undersigned and parent/guardian of _____, am voluntarily leaving my child with the babysitting services at JABS: Joining Active Bodies Studio Inc. ("JABS") and hereby release and waive against all claims JABS, its agents, employees, volunteers, representatives, officers, and directors from any injuries or damages occurring while the above child/ren is/are in the care of JABS. I understand that babysitting services are provided only while I am present in the building and taking class. I understand that babysitting services are provided for a nominal fee. I have read, understand and agree to adhere to the above Babysitting Policies and Procedures of JABS as listed above, as well as this release and waiver.

Signature: _____ Date: _____