



Parent/Child Information:

Child #1 Name:	_ DOB:	/	_/	_ Allergies?			
Child #2 Name:	_ DOB:	/	/	_ Allergies?			
Child #3 Name:	_ DOB:	/	_/	_ Allergies?			
Mother's Name:				_ Phone: ()			
Father's Name:				_ Phone: ()			
Name of person (other than parent/guardi							
Emergency / Medical Information:							
Emergency Contact:		_ Em	ergenc	cy Phone: ()			
Physician Name:				_ Phone: ()			

Please see other side.

Child Care Policies & Procedures:

- Please bring your child directly to the child care room before starting your workout.
- The maximum time a child may stay in the child care room is one hour and a half.
- Children are not allowed in the workout area before, after or during class.
- Children will be released ONLY to the person who dropped them off.
- Please bring your child freshly diapered. Diapers will NOT be changed by the childcare staff. If your child does need his/her diaper changed, then the childcare staff will ask you to leave the class to change your child.
- For the well-being of the other children and staff, please refrain from bringing a sick child into the child care area.
- Please label all of your child's belongings with his/her name.
- Disruptive or inappropriate behavior will not be tolerated. In these circumstances, parents will be notified immediately.
- If a child is inconsolable, parents will be notified and asked to return to the child care room to assist the staff.
- If a child needs to use the bathroom, parents will be notified and asked to accompany the child to the bathroom and return the child to the child care room before returning to class.
- Medications will not be administered by the child care staff.

Liability Waiver:

I, the undersigned, hereby hold harmless, release, waive, and forever discharge, Flow Fitness LLC, its Managers, Members, its child care staff, contractors, employees, volunteers, officers, representatives, agents, organizers, and successors and assigns (collectively, "Flow") from any and all liability, claims, losses, demands, actions or rights of action (whether in law or equity), personally injury, or death, which are related to, arise out of, or are in any way connected with the participation of child care, including those allegedly attributed to the negligent acts or omissions of the above mentioned parties. I understand that the child care services are provided only while I am present in the building and taking class. I understand that if my child becomes inconsolable during the class session, I am responsible to leave class and attend to my child. I understand that children are not allowed in the workout area at any time. I have read and understood the foregoing assumption of risk, and release of liability, and I understand that by signing below, I also agree to indemnify Flow for any liability for injury or death of any person and damage to property caused by my child/children. I UNDERSTAND THAT BY SIGNING THIS FORM I AM WAIVING VALUABLE LEGAL RIGHTS.

Parent's Name:				
Parent's Signature:	Date:	/	/	

