

**Child Information:**



Child's Name: \_\_\_\_\_ Age: \_\_\_\_ Birth Date: \_\_/\_\_/\_\_

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\_\_\_\_\_  
Parent/Legal Guardian(s)

\_\_\_\_\_  
Phone Number(s)

\_\_\_\_\_  
Address City, Zip

\_\_\_\_\_  
e-mail(s)

\_\_\_\_\_  
Emergency Contact Name & Phone

Allergies: \_\_\_\_\_

Special Instructions: \_\_\_\_\_

**Waiver of Liability, Release, and Assumption of Risk & Indemnity Agreement Notice:** This is a legally binding agreement. I understand that by signing this Childcare Waiver of Liability, I release and hold harmless OC United Together, and its directors, officers, advisors, employees, agents, instructors, volunteers, childcare workers, and all other persons or entities acting for them from any and all claims, demands, suits, cost and charges, in connection with or arising out of OC United's childcare service, including but not limited to, personal injury, bodily harm, injury, or property damage occurring while the above child/children is/are in their care at OC United.

I hereby grant permission for OC United and its employees full authority to take whatever actions they deem necessary regarding my child's health and safety in the event I cannot be reached or in the situation where time is of the essence; and fully release OC United and its employees from any liability in connection with those decisions, I grant permission for emergency treatment by a rescue squad, private physician and/or hospital or emergency health care facility staff if needed. Any such action will be taken in the best interest of my child and will be reported to me as soon as possible.

**I HAVE READ AND UNDERSTAND THIS ON-SITE CONSENT AND WAIVER FORM AND SIGN VOLUNTARILY AND ENTIRELY OF MY OWN FREE WILL.**

Parent Name (please print) \_\_\_\_\_

Parent Signature \_\_\_\_\_ Date: \_\_/\_\_/\_\_