

# Self-Care Play Area Waiver

<b>1<sup>st</sup> Childs Name</b>	<b>Date of Birth</b>
<b>Allergies? (Explain)</b>	<b>Special Notes</b>
<b>2<sup>nd</sup> Childs Name</b>	<b>Date of Birth</b>
<b>Allergies? (Explain)</b>	<b>Special Notes</b>
<b>Parents name(s)</b> <b>(Only people named here may pick up child)</b>	<b>Phone # to use while at gym</b>
<b>BC Fitness provides a self-care play area for children 5 – 10. This area is not staffed and the person dropping off the child/ren are fully responsible for their care.</b>	
<b><u>Self Care Play Area Policies and Procedures</u></b>	
<ul style="list-style-type: none"><li>- Maximum time allowed per day : 1.5 Hours</li><li>- Person(s) dropping off child(ren) MUST remain at BC Fitness the entire time your child(ren) are present at the self-care play area</li><li>- Please periodically check on your child to assure they are Ok</li><li>- For the wellbeing of everyone, please do not bring a sick child into the self-care play area</li><li>- Please label all of your child's belongings with his/her name</li><li>- The self-care play area will provide age appropriate toys</li><li>- No food is allowed, only drinks in spill proof containers are allowed</li><li>- Disruptive or inappropriate behavior will not be tolerated, parent will be notified immediately if this occurs.</li><li>- If a child is inconsolable, parents will be notified and asked to return to calm their child down</li><li>- Children will only be released to the person who dropped them off</li><li>- Medication will not be administered</li><li>- If your child needs to use the bathroom, parents will be notified and asked to accompany the child to the bathroom and return them to the child care room.</li></ul>	

**Liability Waiver**

I, the undersigned, hereby hold harmless, waive and release All Heart Fitness (dba BC Fitness), their staff, employees, volunteers, officers, representatives, agents, organizers, and successors from any and all liability, claims, demands, actions or rights of action, which are related to, arise out of, or are in any way connected with the participation of self-care play area, including those allegedly attributed to the negligent acts or omissions of the above mentioned parties. I understand that the self-care play area is provided only while I am present in the building. I understand that if my child becomes inconsolable during my time here, I am responsible to leave and attend to my child. I understand that children are not allowed in the gym 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 it obligates me to indemnify the parties named for any liability for injury or death of any person and damage to property caused by the above mentioned parties negligent or intentional act or omission. I understand that by signing this form I am waiving valuable legal rights.

\_\_\_\_\_  
Parents Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parents Signature

\_\_\_\_\_  
Date

\*\*\* This Document is valid for 12 months from the date it is signed.