



**BABYSITTING WAIVER , EMERGENCY CONTACT AND MEDICAL PERMISSION FORM**

**Parent/Guardian Information:**

Parent/Guardian Name: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Additional phone: \_\_\_\_\_ I will remain in the building while my child is in babysitting (initial here) \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Relation to child: \_\_\_\_\_

**Child Information:**

Child's Name: \_\_\_\_\_ Age: \_\_\_\_ DOB: \_\_/\_\_/\_\_ Allergies: Yes No If yes, explain \_\_\_\_\_

Does your child have any medical conditions we should know about? Yes No If yes, explain \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Child's Name: \_\_\_\_\_ Age: \_\_\_\_ DOB : \_\_/\_\_/\_\_ Allergies: Yes No If yes, explain \_\_\_\_\_

Does your child have any medical conditions we should know about? Yes No If yes, explain \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Waiver and Medical Consent:**

I, the undersigned parent/guardian of the child/children named above, agree to hold Kol HaLev harmless and waive any and all claims in connection with or arising out of Kol HaLev's High Holy Days babysitting service, including, but not limited to, bodily harm or injury to my child. In addition I release and waive all claims against Kol HaLev and its agents, employees, volunteers, representatives, officers and directors arising from my child's/children's participation in High Holy Days babysitting.

I hereby grant permission for Kol HaLev and its employees to act on my behalf to protect the health and safety of my child/children in the event I do not respond to efforts to contact me. I fully release Kol HaLev and its employees from any liability in connection with those actions.

I understand that there is a fee for babysitting and that the fee is \$10 per child per day, with a maximum of \$18 per family per day.

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

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

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