

THE COLONY POOL CLUB - BABYSITTER PERMISSION AND EMERGENCY FORM

PLEASE COMPLETE ALL INFORMATION

Family membership is required; additional payment is also required.

Parent(s) Name(s): _____

Address: _____ Phone(s): _____

Babysitter's Name: _____ Age: _____

Name(s) and age(s) of children Babysitter is responsible for: **(Babysitter is not permitted at the pool without the children they are responsible for)**

EMERGENCY CONTACT:

Name: _____ Phone: _____

Children's Physician: _____ Phone: _____

Hospital Preference: _____

Important Medical Information: _____

I give my permission for my babysitter _____ to care for my child/children at The Colony Pool Club without my supervision. I understand and agree that my permission granted hereby is at my sole risk. I understand and agree that The Colony Pool Club, its employees, agents and volunteers shall not be liable for any direct, indirect, incidental, special, consequential or exemplary damages resulting from the use of The Colony Pool Club by my babysitter or my children when unaccompanied to the Pool by me. Nor shall The Colony Pool Club be responsible for more than its normal stated responsibilities under its rules and regulations and by-laws.

Signature: _____ Date: _____