

Sprouts General Information and Liability Form

Please fill out the information below. This form will be kept on file at Sprouts for one year.

Child(ren) Name: _____

Birth Date(s): _____ **Rising Grade:** _____

Emergency Contact Information

Name: _____ Phone #: _____

People Authorized to pick up my child

Allergies or Medical Conditions

Any other information we should know...

Field Trip and Special Guest Release

I give my child permission to participate in special guest visits, attend field trips and ride the Sprouts bus by signing below.

Sprouts Release of Liability

I, on behalf of myself, my spouse, and each child designated on the registration form (my "child"), hereby waive and release all rights, causes of action and claims against Sprouts, its Officers, Directors, Agents, and Employees, for any loss, expense, damage or injury suffered by my child during the time my child is visiting Sprouts or while my child rides on the Sprouts bus, excluding gross negligence and intentional misconduct. If there is a need for emergency medical treatment, 911 will be called. Should an ambulance be needed, parents will be responsible for any costs. Parents will be contacted as soon as possible after contacting 911. I understand that the provision of child care contains risk of injury to persons and damage to property, and that by signing this release I engage Sprouts LLC, to provide temporary childcare for my children at my own risk. I further understand that there is an assumption of risk associated with the use of the center. I have been given an opportunity to inspect the premises of Sprouts LLC, and found that it is safe and satisfactory for my child. I also have been given the opportunity to ask questions and obtain answers to my satisfaction regarding any and all aspects of Sprouts LLC, and this Release. I understand this Release will be kept on file at Sprouts and will continue in effect for this and any future visits my child may make to Sprouts.

I, the undersigned, do hereby state that I have read the above carefully, fully understand the content and consequences of this agreement, and agree to abide by and be bound by the above policies and procedures and release.

Parent/Guardian Signature: _____ Date: _____