



CONSENT AND COVENANT NOT TO SUE

I hereby request that a child under the age of eighteen (18) years be allowed to accompany me and use the facilities of the Bradley Wellness Center. I understand that child care services are available for children 6 months to 5 years of age for an additional charge in Kids Korner and no charge for children 6 to 11 years of age in KidZone.

For and in consideration of the receipt of the above mentioned child care services, I do hereby forever expressly release, indemnify and hold harmless Bradley Wellness Center, Hamilton Health Care System, Inc., Hamilton Medical Center, Inc., and their respective agents, servants and employees of any and all claims, demands, rights, and causes of action of whatsoever kind and nature arising from and by reason of any and all known and unknown, foreseen and unforeseen, bodily and personal injuries, damages to property and the consequences thereof resulting from said child care services or privileges.

I further agree and understand that all activities, exercises, and use of equipment and facilities shall be undertaken by this minor child at his or her sole risk and I further understand and agree that all persons are encouraged to have a physical examination by a doctor prior to beginning any programs of strenuous new activity.

I do hereby further covenant with Bradley Wellness Center, Hamilton Health Care System, Inc., and Hamilton Medical Center, Inc., that I and my heirs, executors, assigns and transferees, will never at any future time sue any of said entities for or on account of any claim or damages arising out of said child care services or the privilege of allowing my minor child to utilize the facilities of Bradley Wellness Center.

This _____ day of _____, _____. MEMBER or NONMEMBER

Print Child's Name and Birthdate

Print Child's Name and Birthdate

Print Child's Name and Birthdate

Print Child's Name and Birthdate

Signature of Parent or Guardian

Signature of Witness (Staff)