

Bay Tennis & Fitness YOUTH CENTER

*Welcome to the Bay Tennis & Fitness Youth Center.
It is our goal to provide a safe and enjoyable environment.
We appreciate the opportunity to care for your child.*

GENERAL INFORMATION:

- The child center is available to all Bay Tennis & Fitness members and their guests.
- Children 12 months through 12 years are allowed to visit.
- 24 hour notice requested. Please call or we cannot guarantee this service.

POLICIES:

- Parents **must** abide by our sick child policies. Children who exhibit symptoms described in our exclusion policy will not be permitted for obvious reasons. The sick child policy is located on the back of this sheet.
- Bay Tennis & Fitness reserves the right to remove or suspend children perceived as an endangerment to themselves or others.
- Time-out will be used to address behavioral problems.
- Parents or legal guardians must remain in the club.
- Check-in and check-out requires picture identification.
- Parents are responsible for changing diapers.
- No food, gum, or candy is allowed in the center.
- Pacifiers and comfort items such as blankets and stuff animals are permitted but must be labeled.
- Toys from home are not allowed in the center.
- Bottles are permitted but must be used under supervision. Sippy cups with water only are permitted. **No juice.**
- Bottles, bags, and cups must be labeled with child's first and last name.
- Parents will be called if child cannot be comforted from crying after 15 minutes.
- Bay Tennis & Fitness is not responsible for lost or stolen items.
- Children who visit the center more than once per day are limited to a **three hour maximum.**
- Only parents or legal guardians are allowed to bring children into the Child Center.
- Family members are allowed to bring nieces, nephews or grandchildren with our Medical Power of Attorney signed by the parents and notarized by a Notary. **There are NO exceptions to this rule.**

FEES:

\$6.00 per child per hour

After first hour, fee is pro-rated by 15 minute increments.

YOUTH CENTER HOURS:

Monday-Friday 8:00am – 12:00pm

(with the exception of some holidays)

BAY TENNIS
& FITNESS
Sick Child Policy

We wish to provide a safe, healthy environment for your child. In order to protect your child and other children at the center, we must ask you not to bring your child if he or she is sick. The following are important symptoms to look for in your child:

Diarrhea: This means more than one abnormally loose stool.

Severe Coughing: Child gets red or blue in the face; makes high-pitched croupy or whooping sounds after coughing.

Difficult or rapid breathing: Outside of physical exertion.

Yellowish skin or Eyes.

Pinkeye: Tears, redness of eyelid lining, irritation, followed by swelling.

Severe Itching: Itching of the body or scalp or scratching of the scalp (this may be signs of Lice or Scabies).

Unusual Spots or Rashes.

Sore Throat or Trouble Swallowing.

Infected Skin Patches: Crusty, bright yellow, dry or gummy areas of skin.

Sores In or About the Mouth.

Gray or White Stool.

Headache and stiff Neck.

Vomiting.

Unusual Behavior: Child is cranky or less active than usual; child cries more than usual; child feels general discomfort or just seems unwell.

Fever of 100F or higher.

A child may return to Bay Tennis & Fitness **24 hours** after symptoms are gone and/or the child's physician indicates the child is not contagious.

If your child comes down with any contagious diseases and/or is diagnosed by a Healthcare Provider, please inform the Bay Tennis & Fitness staff so that we may inform other parents. Common childhood and contagious diseases include: Chicken Pox; Measles; TB; infest of Lice; Scabies; Streptococcal infection; Impetigo; Pertussis, Hepatitis A, ect.. **Children with contagious diseases will not be allowed in the Youth Center at Bay Tennis & Fitness.**

I understand and agree to adhere to the Bay Tennis & Fitness Sick Child Policy.

Signature of Parent/Guardian

Date

Printed Name of Parent/Guardian

Bay Tennis & Fitness Inc. Youth Center		Member Number _____
Child's Name		Home Phone
Parent's Name		Day Phone
Parent's Name		Day Phone
Date of Birth	Age	School
Address		City/State/Zip
<p>The above applicant has my permission to participate in this activity. Emergency treatment for applicant is authorized provided the Parent/Guardian couldn't be reached. I agree to release and hold harmless Bay Tennis & Fitness, Inc., their staff, agents and officers from or for any claims, liability of damages that may incur as a result of an incident during this activity.</p>		
Parent/guardian signature		Date
<p>I _____, hereby give my consent for the staff of Bay Tennis & Fitness, Inc. to seek medical attention for _____ in the case of an emergency. This will be in effect while my child is in the care of Bay Tennis & Fitness, Inc. staff.</p>		
Medical Information		
Doctor's Name		Phone
(Asthma, food allergies, medications):		
In case of emergency and the named parent or guardian cannot be reached, contact:		
Name		Phone
Name		Phone
<p>Photo Consent: Photographs may be taken during your child's camp or youth center session. These photographs may be used for promotions within the club or for Bay Tennis & Fitness, Inc. publications. Please indicate whether you will or will not grant permission to use your child's photo for these purposes.</p>		
Yes, I grant permission		No I do not grant permission
Parent/guardian signature		Date