

**Student Recreation and Wellness Center  
Tot Spot  
Registration Form**

Today's date: \_\_\_\_\_

Children's Names: \_\_\_\_\_ Birthdate: \_\_\_\_\_  
\_\_\_\_\_ Birthdate: \_\_\_\_\_  
\_\_\_\_\_ Birthdate: \_\_\_\_\_

Father's name (guardian): \_\_\_\_\_  
Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Mother's name (guardian): \_\_\_\_\_  
Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

**Name of persons who will care for your children in case of emergency (other than parents) /PHOTO I.D. REQUIRED**

1. Name \_\_\_\_\_ Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Relationship \_\_\_\_\_  
2. Name \_\_\_\_\_ Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Relationship \_\_\_\_\_  
Children's Physician \_\_\_\_\_ Phone \_\_\_\_\_

Please write any special comments concerning care (i.e. feeding, comforting, napping, favorite activities, etc.)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List any allergies, medications, or special needs: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I hereby give my consent for emergency medical care or treatment, to be used only if I cannot be reached immediately. I also understand that my child is **NOT COVERED** by accident insurance while at the Tot Spot. Finally, I understand that I must remain in the Student Recreation & Wellness Center while my children are at the Tot Spot. Failure to do so may result in a call to Child Protective Services and/or prohibiting use of the Tot Spot in the future.

I agree to pay the rate of \$3.00 per session for each child. I agree to pay the above amount at the front desk when I drop off my children.

Signature of Parent or Guardian \_\_\_\_\_

Requests for Tot Spot services should be made in advance (48 hours) by calling 424-1245. Acceptance of children without a reservation is based upon availability of child slots and staffing at the time the care is needed.