Hold Harmless, Waiver and Release for Babysitting Services

Name of Parent/Guardian 1:	Phone during event:
Name of Parent/Guardian 2: Optional additional contact:	
Food allergies:	
List any behavior issues:	
Child's Name:	Birthdate:
Food allergies:	
Other allergy/medical concerns:	
List any behavior issues:	
Child's Name:	Birthdate:
Food allergies:	
Other allergy/medical concerns:	
List any behavior issues:	
children's participation at the babysitting at Chandni Restaurant. to indemnify, save and hold Indemnities harmless from any loss incur out of or related to the babysitting services offered by Silic	
Parent Signature	
Date	