



HAMILTON PRINCESS

BERMUDA  
HOTEL • BEACH CLUB • MARINA



Prince & Princess  
CLUB

## CHILDCARE REGISTRATION FORM

### CHILD(REN) INFORMATION

CHILD'S NAME	DATE OF BIRTH	ALLERGIES/DIETARY RESTRICTIONS	ADDITIONAL RESTRICTIONS OR COMMENTS

UPON ARRIVAL, PLEASE SHOW YOUR CHILD'S PASSPORT TO VERIFY THEIR AGE AND BIRTH DATE.

### GUEST INFORMATION

PARENT/GUARDIAN NAME: \_\_\_\_\_

CELLULAR PHONE NUMBER: \_\_\_\_\_

HOTEL ROOM NUMBER: \_\_\_\_\_

### DROP-OFF & PICK-UP RELEASE

The following people have permission to pick-up and drop-off my Child(ren) Prince and Princess Club. Please list spouse, grandparents, relatives, caregivers, and friends.

NAME:

RELATIONSHIP TO CHILD:

_____	_____
_____	_____
_____	_____
_____	_____

### EMERGENCY CONTACT INFORMATION

In the event of an emergency please contact:

EMERGENCY NAME: \_\_\_\_\_

RELATIONSHIP TO CHILD: \_\_\_\_\_

CONTACT NUMBER: \_\_\_\_\_

PEDIATRICIAN NAME: \_\_\_\_\_

PEDIATRICIAN NUMBER: \_\_\_\_\_

### ACKNOWLEDGMENT & SIGNATURE

I HAVE SIGNED A RELEASE OF LIABILITY AND WAIVER OF RIGHTS PROVIDED ON THE OTHER SIDE OF THIS FORM AND I AM AWARE THAT IT IS MY RESPONSIBILITY TO CHANGE AND/OR UPDATE THIS FORM AS NECESSARY.

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date



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## RELEASE OF LIABILITY AND WAIVER OF RIGHTS

**PLEASE READ CAREFULLY BEFORE SIGNING. THIS DOCUMENT HAS LEGAL SIGNIFICANCE.**

1. I hereby represent that I am the parent and/or legal guardian of \_\_\_\_\_ (my "Child"). My Child is \_\_\_\_\_ years old. I expressly assume all risks associated with my Child's participation in Prince & Princess Club (the "Program") offered by Hamilton Princess & Beach Club, A Fairmont Managed Hotel (the "Hotel"). My Child may participate in any and all activities at the Hotel or at an off-site location (e.g. water activities, outdoor activities, arts and crafts, exercise, playing and eating, etc.) that may be made available to him/her, without limitation, unless specified on the Childcare Registration Form. I acknowledge that the risks associated with my Child's participation in the Program may, at times, be hazardous.
2. In consideration of receiving my permission to have my Child participate in the Program, I hereby for myself, my Child, my Child's other parent/parents/legal guardians and the insurers, next of kin and heirs of the foregoing, and for any person claiming through or under them (the "Releasers") release, waive, covenant not to sue and forever discharge the Hotel, its owners, its operator and Fairmont Hotels & Resorts (U.S.) Inc. and each of their affiliates, subsidiaries, officers, directors, employees, and agents ("Releasees") from any and all claims, actions, costs and damages that I and/or my Child might claim against as a result of any physical injury to my Child, including death, or property damage or any loss sustained in connection with the Program, without limitation. I also agree to indemnify and hold harmless the Releasees for any and all claims brought by any third party, which I and/or my Child may cause while my Child is participating in the Program. This waiver and release will be interpreted in accordance with the laws of the Province of Ontario.
3. Should my Child become ill or have an accident while participating in the Program, I hereby authorize the Hotel, its servants or employees on my behalf and on behalf of the Releasers to take those steps that the Hotel considers reasonable and necessary for the welfare of my Child including transporting my Child for treatment to the local emergency facility. I accept full responsibility for any and all medical and associated expenses (including, without limitation, transportation to and from any medical facility) that my Child incurs while participating in the Program.
4. Unless otherwise specified on the Childcare Registration Form, I represent to the Hotel, the following: (i) my Child is in good health and is able to participate in any and all activities offered by the Program, and (ii) my Child does not have any allergies or dietary restrictions that would limit his/her participation in the Program.
5. Should my Child disrupt the Program with any inappropriate or unusual behavior that the Hotel, in its sole discretion, considers to be disruptive, I acknowledge that I will be contacted and required to immediately pick-up my Child and to sign him/her out of the Program with no refund.
6. **Cancellation Policy:** Cancellations made within 24 hours will incur a 50% fee. There will be a full charge for no shows. Cancellations made with more than 24 hour notice incur no fees.

**I CERTIFY THAT I AM THE PARENT OR LEGAL GUARDIAN OF MY CHILD, AND HAVE READ, UNDERSTAND AND AGREE TO THE TERMS OF THE ABOVE RELEASE OF LIABILITY AND WAIVER OF RIGHTS. I ACKNOWLEDGE THAT I HAVE VOLUNTARILY SIGNED THIS DOCUMENT AND THAT MY SIGNING CONSTITUTES A RELEASE OF VALUABLE RIGHTS.**

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Print Name of Parent/Guardian

\_\_\_\_\_  
Date

ANY QUESTIONS EMAIL [KIDSCLUB.HAMILTON@FARIMONT.COM](mailto:KIDSCLUB.HAMILTON@FARIMONT.COM)