



Tot Express Child Care Program

**Available Monday–Friday (9am–11am)
Monday–Wednesday (6pm–8pm) Thursday (6pm–7pm)**

**Tot Express CLOSED on Memorial Day, July 4th (Independence Day), Labor Day, Thanksgiving Day, Day after Thanksgiving, Christmas Eve, Christmas Day, New Year’s Eve and New Year’s Day.*

The Tot Express Childcare Program provides a safe, fun, and supervised environment for members children ages 2–12 while parents or guardians utilize the Reminderville Community Center. Please note that all children must be toilet trained to participate in the program. Children are given opportunities to participate in age-appropriate activities, games, crafts, and recreational experiences in a structured and welcoming setting.

Policies and Procedures

- Parents/guardians utilizing the Tot Express Program must remain in the facility at all times while their child is participating in the program.
- Parents/guardians and children are also expected to follow all program policies, check-in/check-out procedures, time limits, behavioral expectations, and safety guidelines established by the Reminderville Community Center. All children and parents/guardians utilizing this program must obtain a valid membership.
- A one-time waiver and child information form must be completed and updated annually in order for children to participate in the program.
- All participants enrolled in Tot Express Care are expected to follow the general rules, policies, and procedures established by the Reminderville Kids Club and the Reminderville Community Center. This includes, but is not limited to, general facility rules and expectations, behavior and disciplinary procedures, health and illness policies, medication authorization procedures, and participant safety guidelines.
- Parents/guardians are responsible for reviewing and understanding all applicable policies prior to participation in the program. Any behavioral concerns, disciplinary actions, health-related matters, or medication requests will be handled in accordance with the policies established by the Reminderville Kids Club management team.
- For complete details regarding General Facility Rules and Regulations, Health and Illness Policies, Medication Authorization Procedures, Behavior Management and Disciplinary Action Policies, and additional program expectations, please refer to the official Reminderville Kids Club Parent Handbook.

Liability Waiver

BY MY SIGNATURE I UNDERSTAND THAT THE REMINDERVILLE ATHLETIC CLUB AND THE CITY OF REMINDERVILLE, THEIR EMPLOYEES, VOLUNTEERS, INDEPENDENT CONTRACTORS AND SPONSORS WILL NOT BE HELD RESPONSIBLE FOR ANY INJURIES SUFFERED ON OR OFF THE PLAYING FIELD/COURT OR WHILE ENROUTE TO AND FROM EVENTS/GAMES/PROGRAMS/CLASSES. I UNDERSTAND NO SUPPLEMENTAL MEDICAL INSURANCE IS OFFERED AND ASSUME RESPONSIBILITY FOR ANY SUCH COSTS. I GIVE PERMISSION FOR OUR IMAGES TO BE USED BY THE RECREATION DEPARTMENT FOR BROCHURES, FLYERS, OR OUR WEBSITE UNLESS OTHERWISE SPECIFIED. I AGREE THAT OUR FAMILY WILL UPHOLD THE HIGHEST STANDARDS OF CONDUCT AND UNDERSTAND THAT THE RECREATION DEPARTMENT HAS THE AUTHORITY TO SUSPEND OR TERMINATE PARTICIPATION AND/OR BAN ATTENDANCE AT FACILITIES.

Printed Name

Signature

Date



Tot Express Child Care Program

FIRST PARENT/GUARDIAN INFORMATION

Parent/Guardian Name: _____

Address: _____

Cell Phone: (_____) _____ Email: _____

SECOND PARENT/GUARDIAN INFORMATION

Parent/Guardian Name: _____

Address: _____

Cell Phone: (_____) _____ Email: _____

EMERGENCY CONTACT INFORMATION

Emergency Contact Name: _____ Relationship to Child: _____

Cell Phone: (_____) _____ Home Phone: (_____) _____

Emergency Contact Name: _____ Relationship to Child: _____

Cell Phone: (_____) _____ Home Phone: (_____) _____

HEALTH

First Child Information

| FULL NAME | DATE OF BIRTH |
|-----------|---------------|
| | |

Does your child have any allergies? No Yes **If you selected yes, please explain.*

Does your child have difficulty with hearing, speech or vision? No Yes
**If you selected yes, please explain.*

Is there anything the Reminderville Kids Club Staff should be aware of?

Second Child Information

| FULL NAME | DATE OF BIRTH |
|-----------|---------------|
| | |

Does your child have any allergies? No Yes **If you selected yes, please explain.*

Does your child have difficulty with hearing, speech or vision? No Yes
**If you selected yes, please explain.*

Is there anything the Reminderville Kids Club Staff should be aware of?

Third Child Information

| FULL NAME | DATE OF BIRTH |
|-----------|---------------|
| | |

Does your child have any allergies? No Yes **If you selected yes, please explain.*

Does your child have difficulty with hearing, speech or vision?

**If you selected yes, please explain.*

Is there anything the Reminderville Kids Club Staff should be aware of?

Fourth Child Information

| FULL NAME | DATE OF BIRTH |
|-----------|---------------|
| | |

Does your child have any allergies? No Yes **If you selected yes, please explain.*

Does your child have difficulty with hearing, speech or vision? No Yes

**If you selected yes, please explain.*

Is there anything the Reminderville Kids Club Staff should be aware of?

Fifth Child Information

| FULL NAME | DATE OF BIRTH |
|-----------|---------------|
| | |

Does your child have any allergies? No Yes **If you selected yes, please explain.*

Does your child have difficulty with hearing, speech or vision? No Yes

**If you selected yes, please explain.*

Is there anything the Reminderville Kids Club Staff should be aware of?
