

Our Lady of the Snows

Office Telephone 775-323-6894
Fax Telephone 775-323-6749

1138 Wright St. Reno, NV 89509
www.olsparish.com

Assumption of Risk and Release of Liability

I hereby give written position as parent/guardian for _____ (the minor), who is _____ years of age, to utilize the Our Lady of the Snows nursery.

I hereby expressly forever waive, release and discharge the Our Lady of the Snows nursery and their representative, from all such liabilities, claims, demands, injuries, damages, rights of action or cause of action, whether the same be known or unknown, anticipated or unanticipated.

Parent/Guardian signature _____ Date _____ Witnessed by _____

In case of an accident or injury, I hereby grant permission for emergency treatment and transportation of my child and release any records regarding their needs. In addition, I authorize the Our Lady of the Snows nursery to contact and release my child to the following individuals for emergency purposes or for special prearranged circumstances.

Mother/Guardian Name: _____

Address: _____

Home Phone: _____ Work/or other Phone: _____

Father/Guardian Name: _____

Address: _____

Home Phone: _____ Work/ or other Phone: _____

Authorized Individuals:

1. Name: _____ Relationship to child _____

Address: _____

Home Phone: _____ Work/ or other Phone: _____

2. Name: _____ Relationship to child _____

Address: _____

Home Phone: _____ Work/ or other Phone: _____

Parent/Guardian Signature _____ Date _____ Witnessed by _____

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Health History Information

Child's Name _____ DOB _____ Age ____ Gender _____

Address _____ City _____ State _____ Zip _____

Email Address _____ Phone Number _____

Does your child have any medical conditions we should be aware of? (Allergies, Asthma, Diabetes, etc.)

Does your child require daily medication? Please indicate the name and reason for taking it.

Did your child have any surgical operations, accidents or injuries, in the last 5 years? Please describe.

Please list any additional information that we should be aware of regarding your child.

Nursery Checklist:

1. I have received a copy of the OLS Parent Guide and agree to all policies and procedures listed.
2. I have provided a copy of my child's immunization record.

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Nursery Parent Guide Sunday 9:30 am Mass

Nursery Address: OLS Youth House (Rock House), 1045 Lander St. Reno, NV

Goals: To provide a safe and comfortable environment for your child while you participate at mass at Our Lady of the Snows Church.

Eligibility: Available for parishioners of Our Lady of the Snows Church children/grandchildren only. Available for children 6 months to 5 years.

Policies/Procedures:

- Parents must complete a Health History Questionnaire for each child and provide a copy of each child's immunization record. All vaccinations must be up to date for children to be admitted to the nursery.
- Only adults authorized on the Health History Questionnaire may drop off or pick up child.
- The same adult that drops a child off must pick them up
- All children must be picked up within 15 minutes of the end of mass
- Please keep children home when sick. Children who have had a fever within 24 hours, have been vomiting or had diarrhea within 24 hours, or other communicable infections will NOT be allowed in the nursery.
- Parents must remain at Our Lady of the Snows for the child's entire stay.
- Children are not allowed out of the nursery.
- For safety reasons, chewing gum and snacks are not allowed in the nursery.
- Drinks in closed containers allowed (please label with child's name).
- Parent will be asked to return to the nursery if child is inconsolable.
- Nursery capacity is limited to 30 children at a time, and will fill on a first-come first-serve basis

Behavior Management:

Removal from the situation/redirections, loss of privilege and time outs, are the methods used for disciplinary purposes.