

Please fill out this form and bring it with you the day of the party. All participants are REQUIRED to have a completed consent from their parent(s) or legal guardian(s) prior to participation. Guests that arrive without this form will be denied participation.

Child Name: _____ D.O.B. _____ 2nd Child's Name: _____ D.O.B. _____

Parent(s) Name: _____ Emergency Contact #: _____

Address: _____ City: _____ State: _____ Zip: _____

Email: _____

Waiver: I recognize that potentially severe injuries can occur in sports or activities involving height or motion, including but not limited to gymnastics, tumbling, trampoline, cheerleading, dance, ball sports, martial arts, party and camp games and activities. Being fully aware of these dangers, I voluntarily consent for my child/children to participate in all Gym-Nest programs and accept all risks associated with that participation. In consideration for allowing my child/children to use these facilities, I, on my own behalf and the behalf of my child/ children and our respective heirs, administrators, executors and successors, hereby forever release and covenant not to sue the Gym-Nest, its officers, directors, share holders, employees, volunteers, and all others associated with the corporation (s) from all liability for any and all damages and injuries suffered by my child/children or myself while under all instruction, supervision, or control of the Gym-Nest. I also understand that the Gym-Nest retains the rights to use photographs, videotapes, motion picture recordings, or any other record of events for publicity, advertising, or any legitimate purposes.

I hereby agree to individually provide for all present and possible future medical expenses which may be incurred by my child as a result of any injury sustained while participating at the Gym-Nest.

I have read and understand this acknowledgement of risk and waiver of liability and I voluntarily affix my name in agreement.

Parent or Legal Guardian's Signature: _____ Date: _____

Medical Insurance Company: _____

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