



Birthday Party Assumption of Risk, Waiver of Liability, And Medical Authorization

As legal guardian of \_\_\_\_\_, hereafter, child(ren) I recognize what potentially severe injuries, including permanent paralysis or death can occur in sports or activities involving height of motion, including but not limited to gymnastics, tumbling, & trampoline, birthday parties, cheerleading, special events including camps, kid's night outs or any and all other programs offered at Creative Me! Gymnastics, Fitness, Swimming Instruction, LLC. Being fully aware of these dangers, I voluntarily consent to the aforementioned person(s) participating in any and all Creative Me! Gymnastic, Fitness, Cheerleading, and Swimming Instruction, LLC programs and activities and **I ACCEPT ALL RISKS** associated with that participation.

In consideration for allowing my child(ren) to use these facilities, I, on my behalf of my child(ren) and our respective heirs, administrators, executors and successors, hereby **COVENANT NOT TO SUE** and **FOREVER RELEASE** Creative Me! Gymnastics, Fitness, Cheerleading and Swimming Instruction, LLC it's officers, employees or agents from all liability for any and all damages or injuries suffered by my child(ren) while under the supervision, or control of Creative Me! Gymnastics, Fitness, Cheerleading and Swimming Instruction, LLC including, without limitation, those damages or injuries resulting from acts of negligence on the part of its officers, employees or agents. By your attendance in class you are granting permission for you and your child to be filmed, videotaped, audio taped, or photographed by a means and are granting full use of your likeness, voice, and words without compensation.

In the event of an emergency I would like my above mentioned child(ren) to be taken to a hospital for medical treatment and I hold Missy Rollins and /or Creative Me! Gymnastics, Fitness, Cheerleading and Swimming Instruction, LLC and its representatives harmless in their execution of this action. Additionally, I hereby agree to individually provide for all possible future medical expenses which may be incurred by my child as a result of any injury sustained while participating at or for Creative Me! Gymnastics, Fitness, Cheerleading and Swimming Instruction, LLC.

If your child requires an inhaler, I understand I am required to stay with him/her or get a doctor's release.

By your attending this event, you are granting your permission for you and your child to be filmed, videotaped, audio taped or photographed by any means and are granting full use of your likeness, voice and words without compensation.

I have read and understood the **ASSUMPTION OF RISK, WAIVER OF LIABILITY** and **MEDICAL AUTHORIZATION. I VOLUNTARILY** affix my name in agreement.

Child's name \_\_\_\_\_ Male/Female Date of birth \_\_\_\_\_

PARENT/LEGAL GUARDIAN \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Medical conditions or allergies we should be aware of?  
\_\_\_\_\_

Parent phone number \_\_\_\_\_ cell phone number \_\_\_\_\_

Alternate Emergency Contact Person \_\_\_\_\_ phone \_\_\_\_\_