



MEDICAL AUTHORIZATION

I fully understand that the staff of Creative Me! Gymnastics, Fitness, Cheerleading and Swimming, LLC are not physicians or medical practitioners of any kind. With that in mind I hereby release Creative Me! Gymnastics, Fitness, Cheerleading and Swimming Instruction, LLC to render first aid to my child in the event of any injury or illness, and if deemed necessary to call an ambulance, which I agree to pay for. As a parent or legal guardian, I agree to provide health insurance for the minor child and/or guarantee payment of any medical expenses incurred as a result of training, performing, or participation in activities with Creative Me! Gymnastics, Fitness, Cheerleading and Swimming, LLC.

Initials X _____

Does your child have any medical conditions (mental or physical) or medications we should be aware of, including but not limited to **(circle all that apply)**; seizures, Downs Syndrome, dizzy spells, previous neck or spine injuries or conditions, high blood pressure, diabetes, autism, epilepsy, heart condition, etc?

*******ALL ABOVE CONDITIONS REQUIRE A DOCTORS RELEASE claiming your child is fit enough to take "GYMNASTICS", "FITNESS", "CHEERLEADING" and/or "SWIMMING".**

*******Please list any other such as asthma, broken bones, or write "NONE" if none exist.**

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

Initials X _____

I understand to keep my child in class, tuition for every month is due by the 5th of that month. If payment is not made by the 5th, waiting list people will be called in place of your spot. A \$5.00 late fee will be charged. Delinquent accounts are grounds for refusal of your child's participation.

Parent/Guardian Signature X _____