CONSENT

AND

WAIVER OF LIABILITY

NAME OF CHILD: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NAME OF PARENT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (LEGAL GUARDIAN OR COSTODIAL PARENT)

Come now the undersigned child and parents/legal guardian/custodial parent and consents, agree and gives full permission for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to take an entry level gymnastics course designed to teach gymnastic fundamentals with Angie Gabel, Jill Hansen, Danielle Gabel as gymnastics instructors. That by necessity, the child will be “spotted”, caught, handled, and led through the necessary movements and that all such activities and technical “batteries” are consented to.

That this course of instruction on the child’s behalf with the realization that some injuries are possible; That any and all claims against Angie Gabel, Jill Hansen, Danielle Gabel or Angie’s Gym as a result of medical injuries are waived by the undersigned and the undersigned agrees to hold Angie Gabel, Jill Hansen, Danielle Gabel or Angie’s Gym harmless from any or all claims, damages, or lawsuits, occasioned by any injury resulting to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

PARENT’S SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DATED: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_understand and agree to the

 (LEGAL GUARDIAN OR COSTODIAL PARENT)

terms of tuition being paid in full monthly and if not, placement in class will be suspended or lost.

PARENT’S SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DATED: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_