

WAIVER/ RELEASE FORM

Child's Name: _____ Birth Date: ____/____/____

Child's Name: _____ Birth Date: ____/____/____

Medical Conditions: _____

Parent/Guardian: _____ Phone #: _____

Parent/Guardian: _____ Phone #: _____

Home Address: _____ City: _____ Zip _____

Email: _____

Emergency Contact: _____ Emergency Contact #: _____

Release /Consent Agreement

I agree that my children named above, attending Artistic Sports Academy Plus, LLC, will be engaging in gymnastics, physical exercise involving various sports, coordination events, and fitness training which could cause injury to them. I agree that my children are participating in these activities and I am assuming all risks of injury that might result. I hereby agree to waive any claims or rights that I might otherwise have to bring suit against Artistic Sports Academy Plus, LLC, it's employees, owners, officers, or agents for injuries that might occur as a result of these activities. Artistic Sports Academy Plus, LLC, will make no evaluation, determination, or recommendation as to whether your children are physically fit for any exercise activity. It is always advisable to consult a physician prior to engaging in or undertaking any physical exercise activity or program. If my children have any physical or mental condition that may impair their ability to engage in these activities, it is my responsibility to obtain a physician's statement describing any limitations to participate in the program and furnish said statement to Artistic Sports Academy Plus, LLC.

Parent/Guardian's Signature: _____ Date: _____

Parent's Signature: _____ Date: _____

Medical Consent and Release

I, the undersigned parent or legal guardian of the above named student do hereby expressly grant authority to the staff of Artistic Sports Academy LLC., to render a judgment concerning medical assistance in the event of an accident, injury or illness during my absence and execute this consent and release provision with the express intention of effecting the extinguishments of and complete release from any and all claims, actions, demands or rights to monetary judgments whatsoever arising from any and all injury or physical harm which may arise from the rendering of such judgments, including, specifically those that may arise out of or be occasioned by, directly or indirectly, any negligent act (s) or omission(s) of Artistic Sports Academy Plus LLC., its officers, agents, employees or servants involved in the rendering of such judgments. Furthermore, in the case of an emergency I consent and expressly grant the staff of Artistic Sports Academy LLC., the authority to obtain medical assistance and treatment as they deem necessary. I understand that Artistic Sports Academy Plus LLC., its officers, agents, employees or servants shall not be responsible for any medical expenses incurred on behalf of the above named student, and that I am responsible for all payment of medical expenses so incurred.

I give permission and consent for a licensed doctor or physician to administer the necessary aid to my child or legal ward should he/she become injured or sick while in attendance at or while participating in any activity associated with Artistic Sports Academy Plus LLC., and to do so without having to wait until I (we) are contacted.

I HAVE READ, UNDERSTAND AND EXPRESSLY AGREE TO THE ABOVE STATEMENT. By the execution hereof I do further bind myself, my child or legal ward and all heirs, executors, administrators, successors or assigns of same.

Parent/Guardian's Signature: _____ Date: _____

Parent's Signature: _____ Date: _____

RULES AND POLICIES

- For the safety of instructors and children; no jewelry, loose fitting clothing, or clothing containing zippers, snaps, or buckles will be permitted. **If attire is deemed inappropriate it is possible that your child may not be able to participate until suitable attire is attained**
- Appropriate attire can be purchased in the ASAP Pro Shop located in the main office.**
- No child is allowed to participate without the written consent of a parent or guardian.** A release form must be filled out each time the child attends a party or open gym, unless they are currently registered, to insure that we have the most up to date information. This form gives us important information, both physical and medical, and advises participants and parents about the inherent risk in any physical activity such as gymnastics.
- Children must be supervised by a responsible adult at all times when not actively engaged in gym activity.**
- Please pick up your child on time.** When circumstances arise that make it impossible for you to be on time, please call the gym so that we can pass the information along to your child. Children must wait inside the gym for their safety. Be careful when entering and exiting the parking lot as many children are leaving and entering the building at varied times.
- We are not responsible for lost or stolen items. A lost and found bin is located in the lobby area. The contents of this bin are donated to local agencies before winter break and again before the end of the session or whenever full. Please keep all valuables at home.
- No one is permitted to enter the Big Gym or Kids Zone areas without the permission of an instructor/staff member.** Children should not enter on their own. If your child is late please have them enter the gym area and wave to let a staff member know that they are present. Children should not run to join their group.