

Phone: 407-438-6878

Email: stickitgym1@aol.com

2020 Summer Camp Registration Form

Parent's Name:		
Street Address: City:		
State: Zip:	Email:	
Home Phone:	Cell:	
Student 1:	Sex:	DOB:
Student 2:	Sex:	DOB:
Student 3:	Sex:	DOB:
Release and Waiver of	Liability, Assumption of Risk, and	d Indemnity Agreement
I understand that participation is entirely by of accidental injury, including permanent dis I've read and agree. Please Initial	sability, paralysis, and death in any activity	
Having been informed of the activities to participant, gives my approval for the abconsideration of my or the student's mem release and discharge Stick It Gymnastic volunteers from all liability for any and all caforementioned equipment, instructors, and Gymnastics. I've read and agree. Please In	ove named student's participation in any bership acceptance at Stick It Gymnastic s, their officers, owners, directors, pro lamages and injuries suffered by the partic I facilities. I will be fully financially respo	y and all activities of the program. In cs, I hereby forever waive, and forever ofessional consultants, employees, and cipant in connection with said use of the
I, the minor's parent and/or legal guardia experience and capabilities and believe the covenant not to sue and AGREE TO INDEMNI demands, losses or damages on the minor negligence of the Releases or otherwise, inc. I, the minor, or anyone on the minor's behalf HOLD HARMLESS each of the Releases from may incur as the result of any such claim. I'm	minor to be qualified to participate in su IFY AND SAVE AND HOLD HARMLESS each of its account caused or alleged to have be cluding negligent rescue operations, and fu alf makes a claim against any of the above any litigation expenses, attorney fees, los	ich activity. I hereby Release, discharge, of the Releases from all liability, claims, een caused in whole or in part by the or in part by the or in the part of t
Printed Name of Parent/Legal Guardian	Signature of Parent/Legal Guard	lian Date
Authorized Persons For Pic	kup	Camp Policies
1		on is due on the 1st day attended each week
2	- Missed days	on is Non Refundable. s cannot roll over to future weeks. ampers should pack 2 snacks.
3	- Full Day Ca	mpers should pack 2 shacks. mpers should pack lunch & 2 snacks. rinks can be purchased for \$1 - \$2
4	- Bring socks	for the trampolines sible for lost or stolen phones/devices/cash
5	- All students	must be well behaved and potty trained tup at 5pm is greatly appreciated :)

Parents Initials _