

Please Printout

**PERMISSION FORM**

(For use in Parties and Parent's Nite Out)

Child's Name \_\_\_\_\_ Age \_\_\_\_\_ Birth Date \_\_\_\_\_

Child's Name \_\_\_\_\_ Age \_\_\_\_\_ Birth Date \_\_\_\_\_

Child/Adult's Name \_\_\_\_\_ Age \_\_\_\_\_ Birth Date \_\_\_\_\_

Address \_\_\_\_\_ Phone # \_\_\_\_\_

In consideration of being permitted to participate in this Gymnastics North activity, I hereby waive and release any and all claims for damages I may have against Gymnastics North, the individual members thereof, and all agents and employees, free and harmless for loss, damage, liability, cost or expense that may be suffered by me or my family members while participating in this event.

Parent's Signature \_\_\_\_\_ Date \_\_\_\_\_