



*Seymour Gymnastics Center*  
BIRTHDAY PARTY WAIVER



**Date of Party** \_\_\_\_\_ **Party Name** \_\_\_\_\_

I fully understand that Seymour Gymnastics/Girls Inc. staff members are not physicians or medical practitioners of any kind. With the above in mind, I hereby release Seymour Gymnastics/Girls Inc. to render temporary first aid to my child in the event of any injury or illness, and if deemed necessary by the Seymour Gymnastics/Girls Inc. staff to seek medical help and/or call an ambulance. I am aware that my son/daughter will be engaging in physical activities which could cause injury to them. I agree that my son/ daughter is voluntarily participating in these activities and is assuming all risks of injury arising out of his/her presence on or about the premises, or his/her use or intended use of equipment or facilities or his/her participation in activities at Seymour Gymnastics Center/Girls Inc.. Seymour Gymnastics/Girls Inc. will make no evaluation or recommendation whether my son/daughter is physically fit for any physical activity. Further, I hereby agree, that Seymour Gymnastics Center/Girls Inc., along with its employees, owners, officers, volunteers and any other representatives shall not be liable for any losses, claims or expenses accruing as a result of me or my child's/children's participation in the event.

Participant's Name(s): \_\_\_\_\_  
\_\_\_\_\_

Phone Number(s): \_\_\_\_\_

Parent Name (Print): \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date \_\_\_\_\_

Please bring signed waiver on the day of the party or sign a waiver upon entry at the gym.

Children can wear comfortable shorts and a t-shirt and/or a leotard.