

Registration Form/Birthday Waiver

Student's Name _

	Last	First				
Date of Birth	Sex					
Mailing Address						
City	State	Zip				
Home #	Cell #	!				
Mother	Work #	#				
Father	Work #					
ACKNOWLEDGEMENT OF RISK AND WAIVER OF LIABLILITY & AGREEMENT NOT TO SUE						
give consent for h Gymnastics progr can occur in any a height and motion performing on all	im/her to participa ams. I recognize t ctivity, including g n. I realize that my	, I hate in Desert Thunder hat potentially severe injugymnastics, which involve the child will be training an atus and events, plus others.	uries es d			
provide for the sar consideration for a release Desert Thu and staff from all	fety and protectior allowing my child under Gymnastics, liability from any a nstruction, supervi	t Thunder Gymnastics to n of my child. And in to use these facilities, I h it officers, employees, co and all damages and/or in sion, or care of Desert Th	nereby paches, njuries			
	ained while trainin	ises incurred by this persong or performing at or for				
of participating or	n the Desert Thunc	vsical condition and is cap der Gymnastics program. e should be aware of:				
agreement not to s my child is in goo participating on th	sue, has been read d physical conditio	Waiver of Liability and thoroughly andI certify ton and is capable of Gymnastics program. Pld be aware of:				
agreement not to s	sue, has been read	Waiver of Liability and thoroughly and understo I is being signed volunta				
Parent/legal guard	lian	Date				



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Student's Name				
	Last	Fi	rst	
Date of Birth		x		
Mailing Address				
City	State	Zip	<u>—</u>	
Home #	Co	ell #		
Mother	Wo	ork #		
Father	Work	#		
ACKNOWLEDGI	EMENT OF RIS & AGREEME			LILITY
As a parent/legal agive consent for his Gymnastics progran can occur in any a height and motior performing on all training devices, is	im/her to particates. I recognicativity, including I realize that gymnastics ap	cipate in Desc ze that poten ng gymnastic my child wil paratus and c	ert Thunder tially severe injo s, which involv Il be training an	uries es d
I understand it is in provide for the sate consideration for a release Desert Thuand staff from all in while under the in Gymnastics and it	fety and protect allowing my chander Gymnast liability from a distruction, supe	etion of my chaild to use the tics, it officers ny and all da	nild. And in ese facilities, I h s, employees, co mages and/or in	nereby paches, njuries
I agree to provide of any injury susta Desert Thunder G	ained while tra			
I certify that my cloof participating or Please list any me	n the Desert Th	under Gymn	astics program.	
This Acknowledge agreement not to somy child is in goo participating on the list any medical co	sue, has been re d physical conc ne Desert Thun	ead thorough dition and is der Gymnas	ly andI certify t capable of cics program. P	
This Acknowledgo agreement not to s fully as to its conto	sue, has been re	ead thorough	ly and understo	
Parent/legal guard	lian	Da	ite	