



937-433-TOPS (8677)
www.kidsaretops.com

You're Invited to a Birthday Party at KIDS Are TOPS Sport Center

I, _____, invite you to my Birthday Party!

Parents Name of Invited Child: _____

Phone #: _____

Address: _____

**PLEASE HAVE A PARENT OR LEGAL GUARDIAN
FILL OUT THE FORM ON THE BACK.**



Assumption Of Risk • Wavier Of Liability • Medical Authorization

Name of Child Participant (if under 18 years of age): _____

Name of Parent of Child Above or Adult Participant: _____

Wavier and Release: I (we) despite all reasonable precautions implemented for safety, am (are) fully aware of and appreciate that severe injuries, including permanent paralysis or even death, as well as other damages and losses associated with participation in the programs or activities at **KIDS Are TOPS Sports Center** (TOPS Gymnastics Club, Inc.) can occur in sports or activities involving height or motion, those activities including, but not limited to, gymnastics, tumbling, trampoline, dance, cheerleading, swimming and diving. In addition, I recognize that swimming or any activity in or around water can result in brain damage or drowning. I (we) knowingly and willingly assume all such risks. Being fully aware of these dangers, I hereby give consent for my child(ren):

Child's Name

to participate in any and all **KIDS Are TOPS Sports Center** (TOPS Gymnastics Club, Inc.) programs. In consideration for my child(ren's) participation, I (we) hereby for myself and my child(ren) and our respective heirs, executors and administrators, **COVENANT NOT TO SUE** and **FOREVER RELEASE KIDS Are TOPS Sports Center** (TOPS Gymnastics Club, Inc.), the owners, operators, directors, officers, employees and other members of **KIDS Are TOPS Sports Center** (TOPS Gymnastics Club, Inc.), from personal injury or accident of any sort or nature suffered by me (us), the undersigned, by reason of participation or membership in classes, lessons or any programs or activities of **KIDS Are TOPS Sports Center** (TOPS Gymnastics Club, Inc.) including those resulting from acts of negligence. I also assume all medical expenses for the aforementioned child or myself, who may be the result of any injuries sustained while training at, or performing for **KIDS Are TOPS Sports Center** (TOPS Gymnastics Club, Inc.). Further, it is affirmed that sufficient insurance covering all such injuries and damages shall be in full force and effect throughout the program or it's equivalent throughout the child's/parent's gymnastics career by my insurance listed on this card.

In any event of an accident or emergency I hereby authorize my child to be transported to a hospital for medical treatment and I hold **KIDS Are TOPS Sports Center** (TOPS Gymnastics Club, Inc.) and it's representatives harmless in the execution of such. Additionally, I hereby agree to individually provide for all medical expenses which may be incurred by me or my child(ren) as a result of any injury sustained while participating at or for **KIDS Are TOPS Sports Center** (TOPS Gymnastics Club, Inc.).

I have read and understand this **ASSUMPTION OF RISK** and **WAVIER OF LIABILITY** and **MEDICAL AUTHORIZATION** and I **VOLUNTARILY** affix my name in agreement.

I, the minor's parent or legal guardian, understand the nature of the activities my child will be involved in at **KIDS Are TOPS Sports Center** (TOPS Gymnastics Club, Inc.), and the minor's experience and capabilities, and believe the minor to be qualified, in good health, and in proper physical condition to participate in such activities. I hereby release, discharge, covenant not to sue, and agree to indemnify and save and hold harmless each of the releasee's from all liability claims, demands, losses, or damages on the minor's account caused or alleged to be caused, in whole or in part by the negligence of the "releasees" or otherwise, including negligent rescue operations. I further agree that if, despite this release, I, the minor, or anyone on the minor's behalf makes a claim against any of the releasees named above, I will indemnify, save, and hold harmless each of the releasees from any litigation expenses, attorney fees, loss liability, damage, or any cost that may occur as the result of any such claim.

Parent/Legal Guardian's Signature

Please PRINT Legal Signature

Date