

Waiver/Release Form

I, the parent/legal guardian of _____, a minor child, understand there are physical risks associated with gymnastics and the physical play involved at a Birthday Party, Field Trip, Playgroup or any other program at the St. Louis Gym Centre. I release St. Louis Gym Centre, its Board of Directors, and all employees from any liability occurring during my child's participation in the St. Louis Gym Centre Program.

Parent Signature

Date

Phone #

Emergency #

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