

GYMNASTICS UNLIMITED



**5351 Pirrone Road
Salida, CA 95368
(209) 545-2341**

Need to wear shorts & t-shirt,
a leotard or a swimsuit.




PLACE:

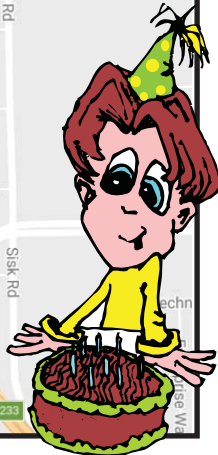
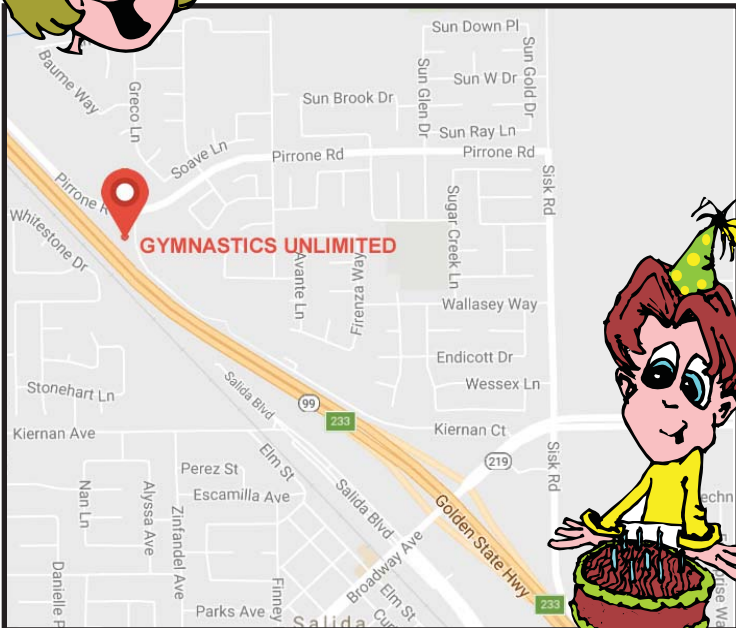
TIME:

DATE:

WHO:

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I understand that gymnastics is an activity involving height, motion, and rotation and that such activities include certain inherent risks. Precautions will be taken to prevent accidents. Simple first-aid will be administered to minor injuries and parents or doctors will be called when necessary. I hereby consent to have my child participate in programs offered by Gymnastics Unlimited. It is hereby agreed that I waive and release all rights and claims for damages that I may have at any time against Gymnastics Unlimited, its representatives, (whether paid or voluntary) for any injury or damages in connection with the gymnastics activities. The risks involved with respect to such a program are fully understood.

LIABILITY RELEASE



Child's Name:

Date of Birth:

Parent's Name:

Address:

Phone #

E-mail:

Parent's Signature:

*** You're Invited to a**

BIRTHDAY PARTY



at

GYMNASTICS UNLIMITED