

**ARK WinGS Gym- Birthday Party Medical Release Form**

I fully understand that ARK staff and administrators are not medical practitioners or physicians to any extent. With that in mind, I hereby release the staff at ARK WinGS Gym to provide any temporary first aid to my child or children in the event of an injury or illness. If necessary, ARK WinGS Gym staff and administrators have permission to call a doctor to seek medical help, including transportation to a hospital or health care facility via ambulance if staff should deem it necessary.

We, the staff at ARK WinGS Gym, know that it is our responsibility to make our parents and athletes aware of the hazards and risks with the sport of gymnastics and cheerleading. Athletes incur the possibility of suffering injuries minor or serious in nature. Parents should make their children aware of the possibility of injury and encourage their children to follow all coaches' instructions and the gyms' safety rules and procedures.

By signing this release form, the parent/guardian agrees that ARK WinGS Gym and its staff members are not responsible for any injuries sustained by any athlete during practice in tumbling, gymnastics, or cheerleading classes in which he/she is participating or traveling to or from the event in the gym. With the above in mind, the parent/guardian and athlete(s) are fully aware of the risks and possibility of injury involved, I consent to have my child or children participate in gymnastics, tumbling, or cheerleading programs offered by ARK WinGS Gym. I, my heirs, executors, and other representatives, waive and release all claims and rights for damages that I or my child/children may have against ARK WinGS Gym, and or its' representatives, paid or volunteer. I also affirm that I now have and will continue to provide hospitalization, accident and health insurance coverage that I consider adequate for both my protection and my child/children's protection.

**Appearance Clause**

I grant permission for ARK WinGS Gym to use my daughter's/son's picture or image in social media, advertisement, and literature for the gym, events sponsored and conducted by them. I have read and agree to the above release and appearance clause.

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SIGNATURE – Participant's or Participant's Parent/Guardian (If Under 19)      Date

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