

Gym Star Sports Center Birthday Waiver

Name: _____ Date: _____

Address: _____ City: _____ State: _____ Zip: _____

Parent Name: _____ Cell Phone: _____

Allergies? _____ Child's Current Medications? _____

Emergency Contact: _____ Phone: _____

Health Insurance: _____

Policy #: _____ Epx. Date: _____

Warning of Risks of Participants: GSSC (Gym Star Sports Center, Inc.) is not responsible for providing medical accidental injury insurance on its students. Parents must have medical insurance for the child enrolled in GSSC. GSSC, its other participants, employees, officers and sponsors shall not be held responsible for treatment or losses due to participants in activities before, during, or after classes or due to any other activity connected with GSSC. Please be advised that any activity involving motion or height creates the possibility of accidental injury. Parents and participants should be aware that injury is possible in connection with this or any other athletic activity. Parents assume all responsibility for any injury due to participants in the activity. GSSC reserves the right to publish any pictures for publicity reasons in brochures, websites, posters, etc.

I/We have read the above statements and fully understand them and agree to abide them.

Parent/Guardian's Signature _____