



FlipStar Inc.

1906 Ferro Drive
New Lenox, IL 60451
815-463-5900

1697 New Lenox Road
Joliet, IL 60433
815-774-9600

flipstarasknow@gmail.com

PLEASE PRINT

Father's Name _____ Mother's Name _____ Last Name _____

Address _____ City _____ St _____ Zip _____ E-Mail _____

Home Phone _____ Mother's Cell _____ Father's Cell _____

Child's Name _____ Gender ___ DOB _____ Health Concerns _____

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Child's Name _____ Gender ___ DOB _____ Health Concerns _____

Release of Liability Waiver ~Name of child participant(s): _____

Parent Release ~ Name of Parent: _____ I, (we) despite all reasonable precautions implemented for safety, am (are) fully aware of and appreciate the risks associated with participation in gymnastics programs and activities. I (we) knowingly and willingly assume all such risks. Consequently, I (we) hereby for myself, heirs, executors and administrators, do waive and release any and all rights and claims for damages against FlipStar Inc., along with its employees, agents, officers, and contractors, 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 FlipStar Inc.

Minor Release ~ Name of Parent : _____ I, the minor's parent and/or legal guardian, understand the nature of these activities and the minors experience and capabilities and believe the minor to be qualified, in good health, and in proper physical condition to participate in such activity. I hereby release, discharge covenant not to sue, and agree to indemnify and save and hold harmless FlipStar Inc., along with its employees, agents, officers and contractors, from all liability claims, demands, loses, or damages on the minor's account including negligent rescue operations. I further agree that if, despite this release, I, the minor, or anyone on the minors behalf makes a claim against any of the releasee's named above, I will indemnify, save, and hold harmless each of the releasee's from any litigation expenses, attorney fees, loss liability, damage, or cost any may incur as the result of any such claim.

Photo Release ~ Participants and/or their parents hereby permit the taking of photos, audio, and videotaping while using the facilities or programs of FlipStar Inc, for publication and use as FlipStar deems appropriate. This may be for advertising in newspapers, flyers, commercials, Facebook pages, website, and general promotion of our programs.

Representation of Authority of Parent or Guardian ~ The undersigned hereby represents and warrants to FlipStar Inc. that he/she is acting as Parent or legally appointed guardian of the above named child, and has full power and authority to execute this Release on behalf of said child. The undersigned shall be liable to FlipStar Inc. for any damages, losses, claims, litigation expenses and attorney's fees resulting from any misrepresentation of such authority.

Signature of Parent or Guardian

Date

By signing said waiver you are agreeing to abide by all FlipStar Inc. rules and policies posted and un-posted.