

EAGLE GYMNASTICS ACADEMY
6085 Sports Village Road, Frisco, TX 75033

Your child has been invited to a birthday party or special event! Your child will be playing games and will also experience some basic gymnastics skills on various equipment in the gym. Safety is our number one priority, therefore:

- *NO SKIRTS, JEANS OR CARGO PANTS WITH BUCKLES/ZIPPERS OR SNAPS***
- *NO LONG EARRINGS, ONLY STUDS ALLOWED***
- *NO SOCKS OR TIGHTS AND HAIR MUST BE TIED UP***
- *NO GUM, FOOD OR DRINKS ARE ALLOWED ON THE GYM FLOOR***
- ****NO ONE UNDER THE AGE OF 4 YEARS OLD WILL BE ALLOWED IN THE GYM AREA***
- ***NO PARENTS ARE ALLOWED IN THE GYM AREA***

For more information or for directions to our gym, please call us at 972.712.4644 or visit our website:
www.eaglegymnastics.com

REGISTRATION AND MEDICAL RELEASE FORMS

Participants Full Name: _____ DOB: _____

Participants Full Name: _____ DOB: _____

Address: _____ City: _____ Zip: _____

Phone #: () _____ Phone #: () _____

In case of emergency, contact: _____ Phone #: () _____

Medical Conditions: Please note any conditions that our staff should be aware of:

1. Having been informed of the activities to be conducted by **Eagle Gymnastics Academy, Inc.**, (EGA) I, a parent or legal guardian of the participant, give my approval for the above named student's participation in any and all activities of the program; and,
2. Myself as well as my spouse or guardian of the above named student(s), assumes all risk and hazards incidental to the program, even if arising from the negligence of other participants and employees. Further, I agree to assume liability for all medical costs, attorney fees, and all other damages resulting from injury to myself and the above signed participants; and
3. I for myself and on behalf of my heirs, assigns, personal representatives or spouse, further release, waive, and forever discharge any and all rights and claims against **Eagle Gymnastics Academy, Inc.**, its owners, instructors, and employees, holding them harmless from any illness or injury, disability or loss or damage to person or property occurring during the program; and
4. Furthermore by signing below for myself, my children and my spouse, I hereby authorize the directors of **Eagle Gymnastics Academy, Inc.**, to act for us according to their best judgment in any emergency requiring medical attention. We know of no mental or physical problems which affect my child's ability to safely participate in this activity.
5. Myself as well as my spouse or guardian of the above named student, understand and will follow the rules of **Eagle Gymnastics Academy, Inc.**, If my child is not following the rules or is endangering him/herself or the safety of the staff, Eagle Gymnastics Academy, reserves the right to remove that child from the activity immediately.
6. **EGA** has put in place preventative measures to reduce the spread of infections, diseases, including but not limited to COVID-19. These measures include the following CDC guidelines pertaining to cleaning our facility, restrooms, reception and training areas. By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that my child (ren) and I may be exposed to or infected by any contagious illness or disease. I understand that exposure or infection may result in personal injury, illness, disability or death. I understand the risk of becoming exposed to or infected by COVID-19 t EGA may result from the actions, omissions, or negligence of myself, other, including, but not limited to, EGA employees, volunteers, athletes and their families.
7. By signing below for myself, my children, and/or my spouse, I agree to all of the above conditions.

SIGNATURE OR PARENT(s) or LEGAL GUARDIAN

DATE
