

FIVE STAR

Liability Waiver/ Member Registration Form

Mother's Name: _____ Cell Phone: _____

Father's Name: _____ Cell Phone: _____

Address: _____

City, State, Zip Code: _____

Home Phone: _____

E-mail Address: _____

Student Name: _____ Gender: _____ Birth Date: _____

Class: _____ Day: _____ Time: _____

2nd Student Name: _____ Gender: _____ Birth Date: _____

Class: _____ Day: _____ Time: _____

How did you hear about Five Star?

Friend _____ (If so, Who?) _____ Website _____ Birthday Party _____ Other _____

ASSUMPTION OF RISK • WAIVER OF LIABILITY • PHOTO RELEASE

(1) I recognize that severe injuries, including permanent paralysis or death can occur in sports or activities involving height or motion, those activities including but not limited to gymnastics, tumbling, trampoline, and cheerleading. I am also aware that participation in certain activities including but not limited to day camps involves transportation to and from field trips and such transportation could cause injury or death in a vehicular accident. Being fully aware of these dangers, I hereby give consent for my child(ren) to participate in any and all Five Star activities and I ACCEPT ALL RISKS associated with such participation.

(2) In consideration for my or my child(ren)'s participation I hereby, for myself and my child(ren) and our respective heirs and successors, PROMISE NOT TO SUE and FOREVER RELEASE Five Star, their respective officers, directors, employees, contractors and volunteers from all liability resulting from damages or injuries incurred as a result of participation including those resulting from acts of negligence.

(3) I am aware that individual and group publicity photos and videos are taken from time to time and in consideration for my or my child(ren)'s participation I hereby grant my permission for my child's likeness to be used in Five Star publicity or advertising.

***I have read and understand this ASSUMPTION OF RISK and WAIVER OF LIABILITY and PHOTO RELEASE and I VOLUNTARILY affix my name in agreement.

I understand that payments are non-refundable(credit only) and any credit not used within one year of issuance will be forfeit.

PARENT/LEGAL GUARDIAN's

Signature _____ Date _____