

**GYMN STAR GYMNASTICS & CHEERLEADER
Authorization and Release Form**

Class _____
Day _____

Students Name: _____ M() F()
Birthday ___ / ___ / ___ School: _____ Grade ___ Age ___

Parent's Name _____

Home Phone _____ E-Mail address: _____

Home Address: _____

City: _____ Zip: _____

Father's Employment: _____ Business Phone: _____

Mobile Phone: _____

Mother's Employment: _____ Business Phone: _____

Mobile Phone: _____

In case Parents cannot be reached

Name: _____ Phone: _____

Family Doctor: _____ Office Phone: _____

Physical conditions of which we should be aware: _____

We, the undersigned, parents or legal guardians of the Applicant whose name appears on this form hereof, for as in consideration of such Applicant's participation in the instructional and recreational programs of Gymn Star Gymnastics & Cheerleading do herewith and hereby agree to indemnify and hold harmless the said Gymn Star Gymnastics and Cheerleading, its offices, instructors, employees and agents, from any and all liability, loss, or damage, including reasonable attorney's fees resulting from any claims, causes of action, demands, costs or judgements against the said Gymn Star Gymnastics and Cheerleading its officers, instructors, employees and agents, from whatsoever extent or nature, including without limitation, any injury illness or accident, to such Applicant arising from such Applicant's participation in any program or instruction of said Gymn Star Gymnastics and Cheerleading.

In Addition, it is understood and agreed to, that we are responsible for Applicant's tuition until such time as written notice by the Gym of withdrawal from it's program. We also warrant by our signature that the Applicant is in good physical condition and is condition and is capable of vigorous participation in a gymnastics or cheerleader program.

Date _____ 20 _____

Parent or Guardian