

# EVENT & BIRTHDAY PARTY WAIVER



1) Child's Name \_\_\_\_\_ DOB \_\_\_\_\_

2) Child's Name \_\_\_\_\_ DOB \_\_\_\_\_ Date and Time of Event: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Address: \_\_\_\_\_

City & State: \_\_\_\_\_ Zip: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

**Suggested attire: Comfortable athletic clothing (shorts, sweats, leggings, t-shirt, athletic shoes.)**

## **ACKNOWLEDGEMENT OF RISK, WAIVER OF LIABILITY AND AGREEMENT TO TERMS:**

**I understand that there may be some risk of injury associated with participation in activities at California Spirit Elite. I agree to waive any and all claims of liability and hold harmless California Spirit Elite in the event that such an injury may occur to my child.**

**Parent/Legal Guardian's signature:**

\_\_\_\_\_ **Date** \_\_\_\_\_