

Guest Release Form



Student's Name _____

All guests must sign a release form to participate / enter the gym function area held at Sterling Academy of Gymnastics, Dance, and Martial Arts.

Name of Guest: _____

Phone Number: _____ Email Address: _____

In case of emergency, please call # _____ Name _____

I, _____, hereby agree to participate in the programs of Sterling Academy of Gymnastics, Dance, and Martial Arts (Sterling Gym). I recognize that any activity involving height, motion, and uneven surfaces can create the possibility of injury. I waive and release any and all rights and claims for damages I may have against Sterling Gym for any and all injuries and damages suffered by those in connection with the program. If I enter the gym area, I waive and release any and all injuries and damages suffered as a result. I also understand that gymnastics, dance, ninja challenge, and martial arts are skills learned under the direction of trained professionals and therefore should only be practiced in an appropriate setting with proper supervision. I hereby give consent to the staff of Sterling Gym to obtain medical care from any licensed physician, hospital, or clinic for the above mentioned for any injury that might arise during participation in the programs of Sterling Gym. Sterling Gym reserves the right to dismiss any person(s) at any time for reasons which, in its sole discretion, are in the best interest of the program and the facility. Please note: For safety, adults and parents are not permitted on any equipment at Sterling Gym. We appreciate your cooperation in adhering to the policies of Sterling Gym. Thank you.

Signature: _____ Date: _____

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