



party

Come jump and  
run and have  
some fun  
at

**PERMISSION SLIP MUST BE SIGNED AND RETURNED BEFORE PARTICIPATION**

My son/daughter \_\_\_\_\_ has permission to participate in gymnastics activities, games, trampoline and related activities. I fully understand the inherent risks and dangers associated with gymnastics or any other sport or physical activity. I accept these risks and assume the responsibility for any losses and/or damages however caused in whole or in part by Palouse Empire Gymnastics Inc., event hosts, other participants, coaches, instructors, sponsors, advertisers, owners and lessees of the premises used to conduct these activities and each of them, their officers, directors, agents, and employees. In consideration of being allowed to participate, the undersigned and the parent(s)/legal guardian(s) of Participant, acting for themselves and on behalf of the Participant hereby fully and forever releases, discharges, holds harmless and agrees to indemnify PEG and PEG GymKids from and against any and all liabilities, losses, damages, claims, demands, litigation, and judgments, present or future, known or unknown, foreseeable or unforeseeable, valid or invalid, direct or consequential, together with reasonable costs and attorney fees (collectively "Claims"), (i) which result, directly or indirectly, from bodily injury, illness, disability or paralysis (whether permanent, temporary, total or partial), death, or other harm to Participant, third parties, or Participant's property, or the property of third parties, and (ii) which are caused by or result, directly or indirectly, from Participant's attendance at and participation in the Activities, or otherwise. Such waiver, release, and indemnification applies to any Claims incurred during or in connection with, or otherwise caused by, arising from, resulting from, or connected to, any of the Activities and the conduct and management thereof by PEG, PEG GymKids or any third party, whether such Claims result from the negligence of PEG, PEG GymKids or from any other cause, to the fullest extent permitted by law.

I give consent to first aid and medical care in the case I cannot be reached.

PARENT NAME \_\_\_\_\_

PARENT SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_ EMERGENCY NUMBER \_\_\_\_\_

CHILD'S FULL NAME \_\_\_\_\_

The party will be held at  
GymKids  
212 Rodeo Drive Suite 510  
Moscow, Idaho

Date

Time

RSVP