



## Visitor Release Form

This form is to be completed by all visiting participants to be used for: birthday parties, open gym or field trips coming to/held at United Sports Academy.

Child's Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Parent giving permission for activity: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

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

**Special instructions our staff should know about your child:** \_\_\_\_\_

\_\_\_\_\_

As legal guardian of all of my student(s), I hereby consent to the all person(s) participating in this facility program. I recognize that potentially severe injuries can occur in any activity involving height, motion, and related activities including: ninja, tumbl trak, trampoline, stunting, dance, martial arts, gymnastics, birthday parties, field trips and physical activity in general. I understand that it is the express intent of all staff and personnel to provide for the safety and protection of my student and, in consideration for allowing my student to use these facilities.

I hereby COVENANT NOT TO SUE and FOREVER RELEASE this facility, affiliated and partner companies and organizations, property owners and lessors, staff, contractors, subcontractors, teachers, and coaches involved in the this facility program, from all liability and for any and all damages and injuries suffered by my student during instruction, supervision, and/or control during any and all classes, birthday parties or field trips. I understand United Sports Academy may take pictures for their website, facebook or promotional materials and not use my child's name. By checking this box I refuse to have pictures used

Date: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_