

You're Invited

In order for your child to participate in the gymnastic activities, complete this form and bring it with you to the special event.

Thanks for your cooperation

Name of child _____

Phone _____

DOB ____/____/____ Age _____

Address _____

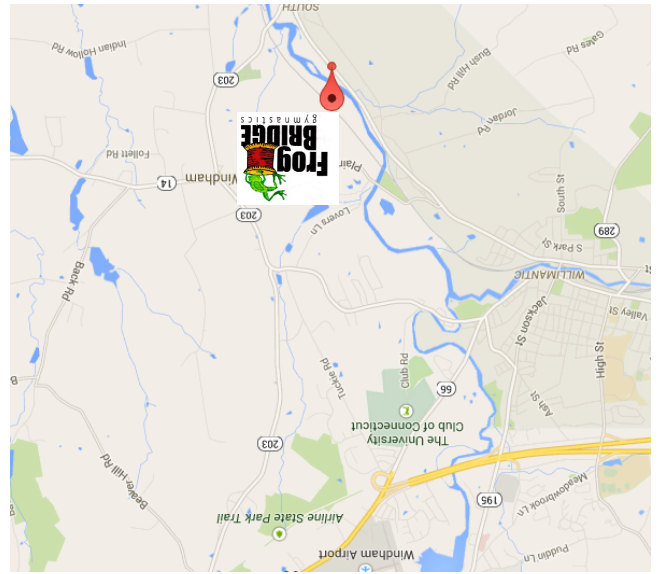
Parent's name _____

e-mail address _____

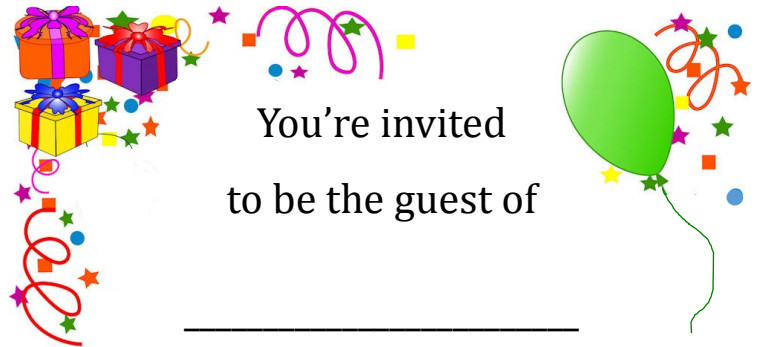
Acknowledgement of Risk, Waiver of Liability and Indemnity Agreement: In case of emergency and I cannot be reached, I authorize the staff of Frog Bridge Gymnastics to obtain whatever medial treatment deemed necessary for the welfare of my child. I further understand and agree that I will be financially responsible for all charges and fees incurred in the rendering of said emergency treatment, regardless of whether or not my medical insurance would cover such charges and feels. I hereby give my consent to my child's participation in the activities of Frog Bridge Gymnastics, and hereby absolve, release, and hold harmless Frog Bridge Gymnastics, it's employees, instructors, agents, directors and officers, including owners and tenants of U-Jam, LLC, from any and all liability for any injuries or damages that my child may suffer in connection with the activities sponsored by Frog Bridge Gymnastics.

Parent's signature _____ Date _____

Entrance and parking in the rear of the building



We are conveniently located across from the U-Haul Rental



You're invited
to be the guest of

for a "hopping good" birthday party!

Frog Bridge Gymnastics
730 Windham Rd
South Windham, CT 06266
860.450.7001

Date _____ Time _____

Please RSVP to _____ at _____

Please remember to wear loose-fitting clothes that are easy to move around in (no zippers, belts, or buckles). And make sure that you bring the enclose waiver and release form (signed)!