~TRICKS FAMILY RULES ~

I hereby declare that the TRICKS Staff has fully explained the TRICKS Family Rules, including tuition due dates, payments options, and make-up procedures. I understand that make-ups have NO Cash value. In order to be eligible for a make-up class, I MUST notify TRICKS prior to my absence. I agree to abide by these rules.

Signature:			
~MINOR~			
I,			
Signed Dated: TRICKS Gymnastics, Inc. 04/28/14			
~ADULT PARTICIPATION~			

I,_____, HEREBY ACKNOWLEDGE that I have voluntarily chosen to participate in gymnastics, dance, swim, classes, (print Participant's name)

programs and/or other activities under the direction of TRICKS Gymnastics, Inc.

I AM AWARE THAT GYMNASTICS, DANCE & SWIM ACTIVITIES (OR ANY OTHER PROGRAM OFFERED BY OR UNDER THE DIRECTION OF TRICKS GYMNASTICS, INC.) INVOLVE RISKS OF SERIOUS BODILY INJURY, INCLUDING PERMANENT DISABILITY, PARALYSIS AND DEATH; AND I AM VOLUNTARILY PERMITTING PARTICIPANT TO PARTICIPATE IN THESE ACTIVITIES, WITH KNOWLEDGE OF THE DANGER INVOLVED AND HEREBY AGREE TO ACCEPT ANY AND ALL RISKS OF INJURY TO PARTICIPANT THAT MAY RESULT THEREFROM.

In exchange for Participant being permitted by TRICKS Gymnastics, Inc. to participate in these activities and/or use their facilities, I HEREBY AGREE THAT I WILL NOT MAKE A CLAIM AGAINST OR SUE TRICKS Gymnastics, Inc. or any of its principals, stockholders, employees or agents, for injury or damage resulting from the negligence or other acts, howsoever caused, by any employee or agent of TRICKS Gymnastics, Inc. as a result of Participant's participation in any activity under the direction of TRICKS Gymnastics, Inc.

I am aware that individual and group **publicity photos** and **videos** are taken from time to time, and in consideration for my, or my child(ren's) participation, I hereby grant my permission for my, or my child's likeness, to be used in TRICKS publicity or advertising.

In addition, I HEREBY ACKNOWLEDGE AND AGREE TO RELEASE, DEFEND. INDEMNIFY AND HOLD HARMLESS TRICKS Gymnastics, Inc., its principals, stockholders, employees and agents, and to ASSUME FULL RESPONSIBILITY FOR ANY LOSS OR DAMAGE AND FOR ANY CLAIM, LAWSUIT OR DEMAND FOR LOSS OR DAMAGE, on account of injury to Participant, whether caused by the active, passive or sole negligence of TRICKS Gymnastics, Inc., its employees or agents, while Participant is on the property of TRICKS Gymnastics, Inc. or is participating in any way in any activity under the direction of TRICKS Gymnastics, Inc.

Should it be necessary, in the opinion of a member of the staff of TRICKS Gymnastics, Inc., to render first aid and assistance to Participant, I hereby grant permission to the staff of TRICKS Gymnastics, Inc. to render such aid and assistance.

I HAVE CAREFULLY READ THIS AGREEMENT AND RELEASE OF LIABILITY AND FULLY UNDERSTAND ITS CONTENTS.

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Signed	Dated:	TRICKS
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