



Please plan to come to our party.
We're going to have a fantastic time!

DATE: _____

TIME: _____

PLACE: AURORA SCHOOL OF GYMNASTICS



303-693-1007
Aurora, CO 80015
3460 S. Fairplay Way



DIRECTIONS TO

Aurora School of Gymnastics (ASG) is a safe and fun environment, but as with any sport, there are risks involved during activity. This waiver must be signed and given to ASG for your child to participate in the party.

Child(ren) name(s) _____

Party date: _____

Participant Waiver- ASG

I give permission for my child(ren) to participate in gymnastics and game activities during the birthday party at ASG. I understand that accidental injury can take place due to the nature of the activities and I assume responsibility and waive any claim for compensation for accidental injury incurred by my child(ren) while at ASG. Any photographs taken at ASG may be used for display or advertising.

Legal guardian signature _____

Date _____