

# PARKOUR

## & Tumbling



**Thursdays, 2/7- 3/14**

**Kindergarten 1:50 to 2:50, 1st to 5th grade: 3:05- 4:00** (class meets at the kinder yard)

**\$95 online payment only-** please don't leave checks in the school office <https://sites.google.com/site/advantageclass/After-School-Classes>

**Contact** [ilive4mykids@gmail.com](mailto:ilive4mykids@gmail.com) for prorated prices,sibling discounts & discounts if you also take tumbling/acting on Tuesdays

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**Student's name:** \_\_\_\_\_ **room #** \_\_\_\_ **grade:** \_\_\_\_ **Towers**  
**Does your child attend the YMCA after our class ?** \_\_\_\_ **Mighty math** \_\_\_\_ **Parkour** \_\_\_\_

**Photo Release and Liability Waiver and Acknowledgment of Risk:**

**READ AND SIGN BELOW**

I understand and agree that participation in any physical fitness activity, dance class, workshop, rehearsal or performance involves a possibility of physical injury or death. I understand that despite precautions, accidents and injuries may occur. These may include but are not limited to stepping on uneven surfaces, slipping on wet surfaces, tripping, twisting an ankle and/or a knee, broken bones, torn ligaments, spine injuries and even death. I voluntarily agree, therefore, to assume all risks and responsibility for any such injury or accident, which might occur to me or my minor child during any of The Advantage Program classes, rehearsals, performances, or activities. I assume all risks related to the use of any and all spaces used by The Advantage Program. I also voluntarily exempt, release, and indemnify The Advantage Program, its owners, agents, representatives, volunteers, assistants, employees, guest artists, and/or students from any and all liability claims, demands, or causes of action whatsoever from any damage, loss, injury, or death to me, my minor child, or property which may arise out of or in connection with participation in any classes or activities conducted by The Advantage Program, its owners, agents, representatives, volunteers, assistants, employees, guest artists, and/or students. I will not hold The Advantage Program, its owners, agents, representatives, volunteers, assistants, employees, guest artists, and/or students responsible for any personal injury or personal property damage sustained before, during or after The Advantage Program classes, workshops, rehearsals, performances or related activities. I further hereby voluntarily agree to waive my rights and that of my heirs and assigns to hold The Advantage Program, its owners, agents, volunteers, assistants, employees, guest artists, and/or students liable for such damage, loss, injury, or death. I declare that, to the best of my knowledge, my minor child is free of any physical, medical, or mental condition which would limit or prevent my child from safely participating in any activity conducted by The Advantage Program, its owners, agents, representatives, volunteers, assistants, employees, and/or guest artists. If I am signing this waiver for my minor child, I certify that I am the parent or legal guardian and have the right to waive these rights. I grant to The Advantage Program, its representatives and employees the right to take photographs of my child in connection with the above-identified subject. I agree that The Advantage Program may use such photographs of my child for any lawful purpose, including for example such purposes as publicity, illustration, advertising, and Web content.

**I have read, understood, and**

**agree to be bound by the above statement.**

**PARENT SIGNATURE:** \_\_\_\_\_ **Phone number:** \_\_\_\_\_

**Parent's Printed name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Emergency contact person's name and #:** \_\_\_\_\_