



# Birthday Party & Special Events Waiver of Liability



Please Print

1st child's name \_\_\_\_\_ Sex \_\_\_\_\_ DOB \_\_\_\_/\_\_\_\_/\_\_\_\_ Age \_\_\_\_\_

2nd child's name \_\_\_\_\_ Sex \_\_\_\_\_ DOB \_\_\_\_/\_\_\_\_/\_\_\_\_ Age \_\_\_\_\_

3rd child's name \_\_\_\_\_ Sex \_\_\_\_\_ DOB \_\_\_\_/\_\_\_\_/\_\_\_\_ Age \_\_\_\_\_

Mother \_\_\_\_\_ Home \_\_\_\_\_ Cell \_\_\_\_\_

Father \_\_\_\_\_ Home \_\_\_\_\_ Cell \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ Phone \_\_\_\_\_

E-mail \_\_\_\_\_

How did you hear about us? Please check one.

- Employee  Driving By  Yellow pages  Word of Mouth  Money Mailer
- Hazelwood Chamber of Commerce  Attended Party  Other \_\_\_\_\_

## ASSUMPTION OF RISK \* WAIVER OF LIABILITY \* PHOTO RELEASE \* MEDICAL AUTHORIZATION \*

I recognize that severe injuries, including permanent paralysis or death can occur in sports or activities involving height or motion, those activities including but not limited to gymnastics, tumbling, trampoline, martial arts, dance, cheerleading, ball sports, swimming and diving. In addition, I recognize that swimming or any activity in or around water can result in brain damage or drowning. I am also aware that participation in day camps involves transportation to and from field trips and such transportation could cause injury or death in a vehicular accident. Being fully aware of these dangers, I hereby give consent for my child(ren) to participate in any and all GK Productions LLC, dba Gateway Kids World, KIPCO LLC or St. Louis Elite programs and activities and I ACCEPT ALL RISKS associated with this activity or participation.

In consideration for my or my child(ren)'s participation, I hereby, for myself and my child(ren) and our respective heirs and successors PROMISE NOT TO SUE and FOREVER RELEASE GK productions LLC, KIPCO LLC, Gateway Kids World, St. Louis Elite, its officers, directors, shareholders, employees, contractors and volunteers from all liability resulting in damages or injuries incurred as a result of participation including those resulting from acts of negligence.

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 child's likeness to be used in Gateway Kids World publicity or advertising.

In the event of an accident or emergency I hereby authorize my child(ren) to be transported to a hospital or medical treatment and I hold Gateway Kids World and its representatives harmless in the execution of such. Additionally, I hereby agree to individually provide for all medical expenses which may be incurred by myself or my child(ren) as a result of injury sustained while participating at or for Gateway Kids World.

I have read and understand this ASSUMPTION OF RISK and WAIVER OF LIABILITY and PHOTO RELEASE and I VOLUNTARILY affix my name in agreement.

Parent/Legal Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_