



TO: _____

**You're invited to
Cascade Elite
Gymnastics**
23101 56TH AVE W.
MOUNTLAKE TERRACE, WA 98043

CEG BIRTHDAY PARTY RELEASE WAIVER

FIRST & LAST CHILD NAME: _____ AGE _____ DOB _____

CHILD NAME: _____ AGE _____ DOB _____

PARENT NAME FIRST & LAST: _____

PHONE NUMBER: _____

E-MAIL: _____

I, _____ (parent/guardian) give permission for my child _____ to participate at Cascade Elite Gymnastics during a birthday party. My child is in good health and has no limitations from participating in any physical activity. My child and I will follow Covid guidelines as stated by Cascade Elite Gymnastics. I understand that gymnastics is an inherently dangerous sport with a risk of injury. I do not hold Cascade Elite Gymnastics or its employees responsible except in cases of negligence.

PARENT SIGNATURE: _____ DATE _____

MUST HAVE SIGNED PARTY RELEASE TO PARTICIPATE

**COME ON OVER FOR SOME
FUN & GAMES!**

BIRTHDAY PARTY CHILD: _____

DATE: _____

TIME: _____

PLEASE RSVP: _____

WHAT TO WEAR:

COMFORTABLE ATHLETIC ATTIRE FOR LOTS OF ACTIVE FUN! NO SHOES OR SOCKS ON THE FLOOR. NO JEANS PLEASE.
WE LOOK FORWARD TO SEEING YOU THERE!