

Juergen's Gymnastics Academy

Birthday Party Release Form

Participant's Name _____ Age _____

Address _____ City _____

Parent's Email _____

Name of Party Child _____

I, the undersigned, voluntarily and knowingly execute this release with the expressed intention of effecting the extinguishments and complete release from any and all claims, actions, demands, or rights to monetary judgement arising from any and all injury or physical harm which may result from participation in any program or activities offered by Achtermann Enterprises, Inc. DBA Juergen's Gymnastics Academy. I understand that Achtermann Enterprises, Inc DBA Juergen's Gymnastics Academy, their employees, representatives, or volunteers are not responsible for any possible accidental that may be sustained from such participation. I acknowledge that I have carefully read this Birthday Party Release Form and completely understand that this is a release of liability.

Printed Name of Parent/Guardian _____

Signature of Parent/Guardian _____

Date _____