NORTH COAST ALL-STARS BIRTHDAY PARTY REGISTRATION & WAIVER

**ALL CHILDREN MUST HAVE A COMPLETED FORM ON FILE PRIOR TO PARTICIPATION**

|  |  |
| --- | --- |
| Birthday Child:  | Date of Party: |
| Your Child’s Name: |
| Birth Date: | Age |
| Please circle Female / Male | Grade |
| Parent’s Name |
| Home Address |
| City | Zip Code |
| Home Phone | Additional Phone |
| Cell/Emergency Number |
| Email Address |
| Are you a registered member at North Coast? Yes / No |
| Known Allergies or Medication: |

**Please read the policies listed below and sign at the bottom.**

**CHILDREN NOT IN THE GYM FOR ACTIVITY PARTICIPATION must be supervised at all times and are NOT permitted in the gym area! GUM IS NOT PERMITTED IN THE GYM AREA**

### DRESS CODE: For the safety of your child please be sure they are wearing flexible clothing absent of hoods, skirts, snaps, buttons and zippers. Please do not wear jewelry or dresses. Long hair is best pulled back in a ponytail(s) without hard pieces or holders. Tennis shoes and socks are to be worn in the gym area. North Coast is not a barefoot facility.

###  ADULTS: All children ages 3 and under must be accompanied by a parent/guardian for the duration of the party. Adults are not allowed on the trampolines, tumble track or other apparatuses and/or equipment at any time. Adult guests are not to spot or assist children in tumbling instruction.

### PHOTO/ VIDEO RELEASE: At times photographs and videos will be taken during classes, events, open gym sessions, birthday parties and other activities. By signing below, I agree that North Coast All-Stars, shall retain all rights to use for publicity and/or advertising purposes any and all photographs and/or videos of participants taken at any/all events or activities that may include your child

**LIABILITY RELEASE & ASSUMPTION OF RISK:** I understand that Ventura Enterprises, Inc. d/b/a North Coast All-Stars (herein collectively referred to as NCAS), its coaches, staff members and other volunteers, will not accept responsibility for injuries sustained by any student during the course of dance, gymnastic, tumbling, or cheerleading instruction, or in the course of attending any exhibition, competition, clinic or party in which he/she may participate. I am fully aware that participation in these activities involves motion, rotation and height in a unique environment and such carries with it a responsible assumption of risk. I have been warned that catastrophic injury, paralysis or even death can result from these activities. I consent to have my child or children participate in the programs, parties and/or activities offered at NCAS. I, my executors or other representatives, waive and release all rights and claims for damages that I or my child have against NCAS or its’ representatives. I give permission for the staff at NCAS to contact an ambulance or such other medical care providers as may be deemed responsible and necessary in the event of injury to my child. Parents should make their children aware of the possibility of injury and encourage their children to follow all safety rules and instructions. I have read and will abide by the policies of NCAS.

|  |
| --- |
| Signature of Parent or Guardian Date  |

**NORTH COAST ALL-STARS 125 BLAZE INDUSTRIAL PARKWAY, BEREA, OH 44017 440-398-9907**