



**Special Occasion Waiver**  
**\*must be signed before party begins\***

Date: \_\_\_\_\_ Time of Party: \_\_\_\_\_

**Parent Agreement:**

1. No parents allowed in the gym.
2. No one under the age of 4 is allowed in the gym.
3. Three-year-olds are allowed in the gym for primary parties only (arranged beforehand).
4. A list of participants' names and contact information must be submitted to the coach before the party.
  
5. If I have reserved the party room, I understand that I am allotted 45 minutes for the party and will complete the party within that time frame.
  
6. I understand that Bluewater Gymnastics Club is peanut-free and I will not bring in any food that contains peanuts.
  
7. I will respect the coaches and any decision they make regarding the gym facility with respect to the safety of the children.
  
8. I have submitted a list of participants and their contact information.

By signing this form, I acknowledge that I am aware that there are risks associated with gymnastics. I warrant that the participants named on this form are physically fit to participate in gymnastics. I declare that I have accurately disclosed all information regarding the named participants. I acknowledge that there is potential risk for injury involved in any sport and I understand that Bluewater Gymnastics has tried to create a safe and controlled environment for participation and that the Club has established rules for participation on and about the gymnastics area that must be followed by the participants. I understand that failure to comply with any of the above policies and rules of the Club may result in the termination of the party with no monetary reimbursement. I waive the rights of the participant to damages or other costs in the event injury is caused due to participation in gymnastics or other involvement with Bluewater Gymnastics Club.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Coaches Guarantee:**

I promise to explain the rules of the gym before allowing the children to participate.

I promise to enforce any rules within the gym for the safety of the children involved.

I promise to make your child's visit to Bluewater Gymnastics as fun and safe as possible.

I promise to aid in any concerns to the best of my ability. If I cannot help, I will forward the concern to someone who will be able to assist you.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_