



Olympia GYMNASTICS CAMP
PO Box 820295
Houston, TX 77282

Liability Waiver and Release

Child's Name _____ Date of Birth _____

SS# _____

Address _____ City _____ St _____ Zip _____

Phone Number _____ Emergency Phone Number _____

I am giving my child _____, permission to participate at Olympia Gymnastics Camp operated by Svetlana Interests LLC. I understand and am aware that participation involves risk of injury and that I am voluntarily giving permission to participate in this activity. I hereby agree to expressly assume and accept any and all risk of injury from my child's participation in the above activity. I do hereby and forever discharge, release, indemnify and hold harmless Olympia Gymnastics Camp operated by Svetlana Interests LLC, including their employees, for and on behalf of myself and my minor child and our respective heirs, successors, and assigns, from any and all liability, rights of action, causes, losses, claims, demands, cost and expenses for damages and /or personal injury that my arise in conjunction with my child's participation in this activity.

Signature of Parent or Guardian

Date

Please print Name

OGC
Olympia Gymnastics Camp
P.O. Box
Houston, TX 77282
877-642-2267