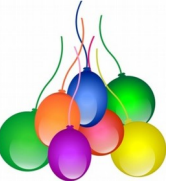


HOLD HARMLESS AGREEMENT

I hereby give my permission for my child _____ to participate in the WLAC Birthday Party. I hereby accept all risks and responsibilities for the use of the premise, area, and/or facility including the use of the equipment. I further agree to indemnify and hold harmless the staff and owners of WLAC and The Ninja Zone, including the corporate officers, from all liability claims, demands, actions, and causes of actions, that may arise out of the use thereof.

I hereby declare myself and/or my child to be physically sound, having medical approval to participate in activities of Westosha Legacy Athletic Club, LLC and The Ninja Zone. In the event of an injury, I hereby give my permission to Westosha Legacy Athletic Club, LLC, and The Ninja Zone, staff to render any first aid emergency treatment to my child while participating in any activity of Westosha Legacy Athletic Club, LLC and The Ninja Zone. It is understood that in an emergency situation, a conscientious effort will be made by the staff to inform the parent(s) or guardian(s). I accept responsibility for any and all medical treatment rendered to myself or my child. I grant Westosha Legacy Athletic Club, LLC and The Ninja Zone staff permission to transport or call for transport to an area hospital or treatment facility if it is deemed necessary. By signing below, I acknowledge and agree with the statements disclosed above as well as the Rules and Policies which can be provided to see if necessary. To ensure the safety of my child, I will update any changes in my contact information as necessary.

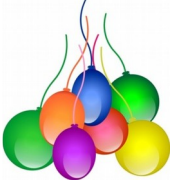
I HAVE READ AND UNDERSTAND THE TERMS OF THE AGREEMENT:



Signature: _____ Date: _____

Print Name: _____ email: _____

Phone #: _____



For: _____

Date: _____

Time: _____

RSVP: _____

Place: Westosha Legacy Athletic Club

2449 Pierce Drive Spring Grove, IL 60081

WWW.WestoshaLegacyAC.com

815-675-3005

2449 Pierce Drive Spring Grove, IL 60081

Gymnastics-Ninja Zone-Tumbling-Open Gym

