

# Holiday ★ Drop & Shop Black Friday Overnite



Do that your Black Friday holiday shopping! Drop the kids at Wildcard  
Gymnastics for open gym and fun!

There will be games, pizza, movies and more!



8:00 p.m. (Thurs) - 10:00 a.m. (Fri)  
November 27th—28th



**For more information call:  
262-923-7418 or visit our  
website at  
[www.wildcard-gymnastics.com](http://www.wildcard-gymnastics.com)**

**3545 N 127th St  
Brookfield, WI 53005**

**Open to the public!**

**\$40.00 for pre-registered non-  
members or \$45.00 at the  
door.**

**\$35.00 for Team members.  
\$25.00 for additional siblings  
\$20.00 stay til midnite!**

**Everyone is welcome!  
Bring a Friend!**

**\*Don't forget your sleeping bag & pillow**

**Detach and return the Registration Form with full payment before 11/20/14 to receive the pre-registration price.**

Name _____	Age _____	Phone _____
Address _____	Zip _____	Emergency Contact _____
Other children _____	Age _____	
	Age _____	Total Amount _____

## Waiver and Agreements

By signing below, I acknowledge reading, understanding, and accepting the statements herein. **Agreement to participate and liability waiver**—I understand that gymnastics activities involve risk and possible injury. I understand that it is my responsibility as a parent/guardian or adult participant to not partake in any activity if there is any physical, emotional, behavioral, and/or other problems that might compromise my safety. I understand that injuries can and do happen and that health insurance is a requirement. I agree to hold Wildcard Gymnastics harmless for any injury or accident that may result. Therefore, I release Wildcard, and staff, the facility, the equipment owners, and other related parties from the responsibility or liability for insurance deductibles, medical expenses and/or other damages incurred by my child, myself, or other family members while participating, visiting the facilities, parking area, or traveling to a related event. **Authorization of medical care** - In case of injury or illness during participation, I authorize and desire medical care for my child or myself at the discretion of the attending physician. I accept responsibility for all associated expenses. **Transportation of a participant** - I authorize activity related transportation of my child. **Parent supervisory responsibility** - When I visit Wildcard Gymnastics, I understand and accept the responsibility and any associated liability, of constantly supervising, controlling and restricting activities as necessary to assure safety of the children whom I bring and myself. These agreements, waivers, and authorizations will remain valid and in force as long as and whenever my child, myself, or my family member participates in any activity at or with Wildcard Gymnastics.

**Parent/Guardian Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**TOTAL AMOUNT PAID** \_\_\_\_\_