TWIGS KIDS CONSENT/RELEASE FORM	PERSONAL INFORMATION
As parent or legal guardian, I recognize that potentially severe injuries, including permanent paralysis or death can occur in sports or activities involving height or motion, including but not limited to gymnastics, tumbling, trampoline, martial arts, dance, cheerleading, swimming and diving. In addition, swimming or activities in or around water can result in brain damage or drowning. Being fully aware of these dangers, I, on my own behalf and the behalf of my child(ren) and our respective heirs, administrators, executors and successors, hereby COVENANT NOT TO SUE and FOREVER RELEASE Twigs Kids, its officers, directors, shareholders, employees or agents from all liability for any and all damages or injuries suffered while under the instruction, supervison, or control of Twigs Kids including, without limitation, those damages or injuries resulting from acts of negligence on the part of its officers, directors, shareholders, personnel and hold Twigs Kids and its representatives harmless in their execution of this action. Additionally, I hereby agree to individually provide for all possible future medical expenses which may be incurred by me or my child as result of any injury sustained by me or my child while in attendance at or participating for Twigs Kids. I understand and agree that photos taken of me or my child by TWIGS may appear in advertisement publications and/or be available for resale. Furthermore, I have read and understand this ASSUMPTION OF RISK, WAIVER OF LIABILITY and MEDICAL AUTHORIZATION and I VOLUNTARILY affix my name in agreement. Signature of Parent or Legal Guardian	Child's Name:
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