Acrobatics Party Waiver

Acknowledgment of Risk

I, the undersigned, understand and acknowledge that participation in acrobatics activities involves inherent risks, including but not limited to falls, slips, collisions, muscle strains, and other potential injuries. I voluntarily assume all risks associated with these activities, whether foreseeable or unforeseen, and agree to allow my child to participate fully at their own risk.

Release of Liability

I voluntarily release Empower Movement Company, its employees, instructors, agents, and representatives from all liability for loss, damage, injury, or expense that my child, my next of kin, or I may suffer or incur as a result of their participation in this event, regardless of the cause, including negligence, to the fullest extent permitted by law.

I acknowledge that Empower Movement Company staff are not responsible for any lost or stolen property or for any bodily or personal injury arising out of my child's participation in physical training, acrobatics, or athletic activities.

Health Declaration

I confirm that my child is in good health and has no medical conditions, injuries, or impairments that would limit or prevent safe participation in acrobatics activities. I agree to disclose any relevant medical conditions or allergies on this waiver before their participation in the event.

Behavioural Expectations

I agree to ensure that my child follows all safety instructions and guidelines provided by Empower Movement Company staff. I understand that failure to comply with these rules may result in my child's immediate removal from the activity.

Guardian/Parent Consent (for Participants Under 18)

As the parent or legal guardian of the participant named above, I have carefully read and understood this waiver. I accept its terms on behalf of my child and consent to their participation under the conditions outlined.