



6904 Downwind Road
Greensboro, NC 27409
(336) 665-0662

TUMBLEBEES PARTICIPATION RELEASE

Dear Parents,

Your child's school is offering the ultimate field trip to Tumblebees Ultimate Gym. Tumblebees strives to be a safe and fun-filled environment. The information below is required before your child participates in this field trip.

Thank you!

Student Name: _____ Date of Birth: _____
School: _____
Parent's Name: _____ Home Phone#: _____
Address: _____
City: _____ State: _____ Zip: _____
Emergency Contact Name and Phone#: _____

By permitting the above named child to enter Tumblebees Ultimate Gym and/or participate in any activity, I acknowledge the fact that any of the activities that involve height and/or motion, could result in serious injury or death. I release Tumblebees Ultimate Gym, it's owners and employees from any liability. I also authorize Tumblebees Ultimate Gym's employee to administer first aid, if necessary.

Parent/Guardian Signature: _____ Date: _____



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