

# FLIGHT ACADEMY ALL-STAR RELEASE FORM

We/I being the guardian of \_\_\_\_\_ do hereby consent that he/she be able to participate in tumbling/cheerleading/exercise activity at Flight Academy All-Stars located in the Chattanooga, TN area.

We/I agree to provide health and accident insurance to any injuries sustained on Flight Academy All-Stars premises. If no insurance is available, we/I agree to pay for any medical or hospital bills accumulated.

We/I do hereby covenant and agree to hold harmless Flight Academy All-Stars(Flight Academy All-Stars, LLC) for any damages on Flight Academy premises and/or to third persons as a result of the negligent acts on Flight Academy Property/Personnel.

FLIGHT ACADEMY STAFF

\_\_\_\_\_  
Parent or Guardian

\_\_\_\_\_  
Date