



## *Birthday Party Waiver*

I, \_\_\_\_\_, hereby give Balanced Life Skills permission for my child, \_\_\_\_\_, to attend a birthday party for \_\_\_\_\_ at Balanced Life Skills on \_\_\_\_/\_\_\_\_/\_\_\_\_.

Should injury occur, I hereby give permission for trained medical personnel to administer necessary medical treatment.

I hereby release Balanced Life Skills, LLC and its employees, agents, owners from any and all liability to myself or the party attendee. My signature is proof of my intention to execute a complete and unconditional release of all liability to the full extent of the law.

Signed \_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_.

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Zip code \_\_\_\_\_

Phone \_\_\_\_\_