



6904 Downwind Road  
Greensboro, NC 27409  
336.665.0662

# PARTICIPATION RELEASE FORM

Dear Parents,

Your child's school is offering the ultimate field trip to Ultimate Kids. Ultimate Kids 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's 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 Ultimate Kids 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 Ultimate Kids, its owners and employees from any liability. I also authorize Ultimate Kids' employed to administer first aid, if necessary.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

810.PRF.94



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