

# MR. DONAVAN

## MOBILE ATHLETIC CONCEPTS FOR KIDS

SPECIALIZING IN MOTOR DEVELOPMENT, MOVEMENT & ENRICHMENT  
(214) 208-2134 - MRDONAVAN@SBCGOBAL.NET

### REGISTER HERE FOR FUN FITNESS & MOVEMENT!

CHILD'S NAME		AGE
CHILD'S BIRTHDAY		
PARENT'S NAME		
ADDRESS		
CITY		ZIP
E-MAIL		
PHONE NUMBERS		
HOME		CELL
MOM/WK		DAD/WK
SPECIAL CONDITIONS/NEEDS?		

#### WAIVER FOR INSTRUCTION

I, THE UNDERSIGNED, HEREBY GIVE PERMISSION TO MR. DONAVAN AND EMPLOYEES TO INSTRUCT MY CHILD IN PHYSICAL FITNESS ACTIVITIES. I HAVE BEEN ADVISED THAT PRIOR TO BEGINNING ANY PHYSICAL ACTIVITY OR ROUTINE I SHOULD CONSULT WITH MY CHILD'S PHYSICIAN TO ENSURE THAT HE/SHE IS IN A MEDICALLY HEALTHY PHYSICAL STATE. I ALSO UNDERSTAND THAT EVEN WHEN ENGAGING IN SUPERVISED PHYSICAL ACTIVITIES THERE IS A POSSIBILITY OF INJURY. IN THE UNLIKELY EVENT THAT AN INJURY SHOULD OCCUR, I HEREBY RELEASE MR. DONAVAN AND ALL OWNERS, EMPLOYEES AND ASSISTANTS OF DONAVAN'S SPORT'S, L.L.C. D/B/A MR. DONAVAN FROM ALL LIABILITY FOR ANY AND ALL INJURIES AND OTHER DAMAGES SUFFERED BY MY CHILD. FURTHER, I RELEASE ANY FACILITY USED BY MR. DONAVAN FROM ALL LIABILITY FOR ANY AND ALL INJURIES AND DAMAGES SUFFERED BY MY CHILD. FOR THE PURPOSE OF EVALUATING MY CHILD'S PHYSICAL NEEDS, MR. DONAVAN MAY VIDEOTAPE OR PHOTOGRAPH MY CHILD DURING ANY CLASS, SESSION OR ACTIVITY. I HEREBY GRANT PERMISSION TO MR. DONAVAN TO USE SUCH VIDEOTAPES OR PHOTOGRAPHS FOR SUCH EVALUATION AND IN CONNECTION WITH THE PROMOTION AND ADVERTISEMENT OF MR. DONAVAN. I HEREBY RELEASE MR. DONAVAN FROM ANY AND ALL CLAIMS AND LIABILITY RELATING TO SUCH VIDEOTAPES, PHOTOGRAPHS AND THE USE AND REPRODUCTION THEREOF. MR. DONAVAN RESERVES THE RIGHT TO DENY OR DISCONTINUE INSTRUCTION TO ANYONE FOR ANY REASON AT ANY TIME. MR. DONAVAN REQUIRES AT LEAST ONE PARENT OR ADULT GUARDIAN TO REMAIN PRESENT DURING THE ENTIRE CLASS, SESSION OR ACTIVITY. MR. DONAVAN RESERVES THE RIGHT TO CANCEL ANY CLASS, SESSION OR ACTIVITY AT ANY TIME, INCLUDING WITHOUT LIMITATION, DURING OR IMMEDIATELY BEFORE SUCH CLASS, SESSION OR ACTIVITY, IN THE EVENT THAT A PARENT OR ADULT GUARDIAN IS UNABLE TO REMAIN PRESENT WITH THEIR CHILD DURING THE ENTIRE CLASS, SESSION OR ACTIVITY. FINALLY, I UNDERSTAND THAT SHOULD ANY PORTION OF THIS WAIVER BE ADJUDICATED TO BE UNENFORCEABLE THAT ALL REMAINING PROVISIONS SHALL REMAIN IN FULL FORCE AND EFFECT. I HAVE READ AND UNDERSTAND THE ABOVE WAIVER, AND BY SIGNING BELOW I REPRESENT THAT I AGREE TO THE ENTIRETY OF THE WAIVER TO THE GREATEST EXTENT AT LAW.

HOW DID YOU HEAR ABOUT MR. DONAVAN \_\_\_\_\_

PARENT'S SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_



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