



KID'S NIGHT OUT

Email form to: annas@fountainfitnesscenter.com

Parent Info

First Name: _____ Last Name: _____

Email Address: _____

Phone number: _____

Address: _____

Child/ren Info:

Child #1:

First Name: _____ Last Name: _____

Birthdate: _____

Grade as of September 2026: _____

Child #2:

First Name: _____ Last Name: _____

Birthdate: _____

Grade as of September 2026: _____

Child #3:

First Name: _____ Last Name: _____

Birthdate: _____

Grade as of September 2026: _____

Credit Card Number: _____

Exp Date: _____



Liability Release and Parental Consent Form

In consideration of the acceptance of my application for the Kids Night Out recreation program, I hereby waive, release, and discharge any and all claims for damages for personal injury, property damages or which may hereafter occur to my child as a result of their participation in said recreation program. This release is intended to discharge in advance Kids Night Out located on the grounds of Fountain Fitness Center located at 1150 Rt 17N Ramsey NJ 07446, its officials, officers, employees, volunteers, and agents from liability. It is understood that some recreational activities involve an element of risk or danger of accidents, and knowing those risks, I hereby assume those risks. It is further understood and agreed that this waiver, release and assumption of risk is to be binding on my heirs and assignees. Consent of the Parent of Guardian

I give consent for my Child, (Print name) _____ to participate in the above camp program, and I execute the above liability release on my child's behalf.

Consent for Treatment

I hereby give my consent to have the above applicant treated by emergency medical personnel, a physician or surgeon, in case of a sudden illness or injury while participating in the above activity. It is understood that the Kids Night Out event located on the grounds of Fountain Fitness Center, LLC located at 1150 Rt 17N Ramsey NJ 07446 will provide no medical insurance for such treatment, and that the cost thereof will be at my expense.

I have read and understood the foregoing registration liability release and parental consent form, and agree to all of its terms and conditions.

Parent/Guardian Signature _____

Print Name _____ Date _____