

Welcome to Corkscrew Gymnastics & Sports Academy

We are located at:
2309 N. Ringwood Road
McHenry, IL 60050.



We are located 1/2 North of Rte 120 on Ringwood Road

Please wear comfortable clothing. No baggy clothing, hoodies, belts, jeans or clothing with zippers. Shirts need to be able to be tucked in. No skirts/tutu with leotards. Long hair should be pulled back. No jewelry or gum.

Corkscrew Gymnastics & Sports Academy Event Waiver

1st Child's Name _____ DOB _____

2nd Child's Name _____ DOB _____

Address _____ City _____

Does your child have any allergies/medical concerns? _____

Parent/Guardian Name _____

Home # _____ Cell # _____

Emergency Contact Name and Number _____

Email _____

How did you hear about us? Website Outdoor Sign Friend/Family (Name) _____
 Advertisement (which one) _____ Other _____

I understand the sport of gymnastics involves certain inherent risks, including the possibility of serious injury or death. In consideration of my child's participation in these activities, including but not limited to gymnastics classes, tumbling/cheer classes, private lessons, clinics, open gym, competitions, team work-outs or any special events of Corkscrew Gymnastics & Sports Academy, it's respective owners, officers, employees and members and do hereby myself, my heirs, executors, and administrators, release and forever discharge all rights and claims for damages which I or my child may have or which may hereafter accrue to me or my child arising out of or connected with me or my child's participations in any activities of Corkscrew Gymnastics & Sports Academy. My child has also been informed of the risk of possible injury while participating in any gymnastics related activity.

I hereby declare myself and/or my child to be physically sound, having medical approval to participate in activities of Corkscrew Gymnastics & Sports Academy. In the event of an injury, I hereby give my permission to Corkscrew Gymnastics & Sports Academy staff to render any first aid emergency treatment to my child while participating in any activity of Corkscrew Gymnastics & Sports Academy. It is understood that in an emergency situation, a conscientious effort will be made by the staff to inform the parent(s) or guardian(s) listed above. I accept responsibility for any and all medical treatment rendered to myself or my child. I grant Corkscrew Gymnastics & Sports Academy staff permission to transport or call for transport to an area hospital or treatment facility if it is deemed necessary. By signing below, I acknowledge and agree with the statements disclosed above as well as the Rules and Policies which can be provided to see if necessary. To ensure the safety of my child, I will update any changes in my contact information as necessary.

I hereby grant permission to Corkscrew Gymnastics & Sports Academy for the use of my child's photo, and/or name for publications promoting activities sponsored by Corkscrew Gymnastics & Sports Academy.

Parent / Guardian Signature _____

Relationship _____

Today's Date _____

Birthday Party Open Gym Dodgeball Other