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2011-2012 Waiver for Open Gym/Birthday Parties/Activities

Athlete's Name: _____ Date of Birth: _____
 Athlete's Name: _____ Date of Birth: _____
 Parent's Name: _____
 Address: _____
 City/Zip: _____ Phone: _____ Cell: _____

Release and Waiver of Liability, Assumption of Risk, and Indemnity Agreement

I understand that participation is entirely by my own choice and with the understanding that there is a risk and the possibility of accidental injury, including permanent disability, paralysis, and death in any activity, including unusual motion or height. **I've read and agree. Please initial _____**

Having been informed of the activities to be conducted by Stick It Gymnastics, I, a parent or guardian of the participant, give my approval for the above named student's participation in any and all activities of the program. In consideration of my or the student's membership acceptance at Stick It Gymnastics, I hereby forever waive, and forever release and discharge Stick It Gymnastics, their officers, owners, directors, professional consultants, employees, and volunteers from all liability for any and all damages and injuries suffered by the participant in connection with said use of the aforementioned equipment, instructors, and facilities. **I've read and agree. Please initial _____**

I, the minor's parent and/or legal guardian, understand the nature of the above referenced activities and the minor's experience and capabilities and believe the minor to be qualified to participate in such activity. I hereby Release, discharge, covenant not to sue and AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS each of the Releases from all liability, claims, demands, losses or damages on the minor's account caused or alleged to have been caused in whole or in part by the negligence of the Releases or otherwise, including negligent rescue operations, and further agree that if, despite this release, I, the minor, or anyone on the minor's behalf makes a claim against any of the above Releases, I WILL INDEMNIFY,SAVE AND HOLD HARMLESS each of the Releases from any litigation expenses, attorney fees, loss liability, damage, or cost any Release may incur as the result of any such claim.

 Signature of Parent's or Legal Guardian of athlete's under 18 years old

 Date

 Athlete's Signature (18 years and over)

 Date

Please note: This form is good for one year August 1, 2011- August 1, 2012

Office Use Only

Adult Open Gym

Registration Payment Amount: _____
 Date: _____
 Type of Payment: C/C D/C Ck# _____

Athlete's Open Gym/Birthday/Other

Circle One

Date: _____
 Birthday/Other: Specify _____