

Gym 2 You waiver

Participant's Full Name: _____ Date Of Birth: _____
Address: _____ City: _____
E-mail: _____ Phone number: _____

Event Attending: _____ Classes _____ Birthday party _____ Camp

Please circle yes or no: I give permission for the minor to be photographed/videographed for promotional purposes. **Yes** or **No**

Please read carefully and sign the waiver form. Participation is not allowed until the waiver is signed.

I, despite all reasonable precautions implemented for safety, am fully aware of the risks, including the risk of injury, and/or death, as well as other damages and losses associated with participation in the programs or activities. I knowingly and willingly assume all such risks. Consequently, I hereby for myself, heirs, executors and administrators, waive and release any and all rights and claims for damages against the owners, operators, coaches and members of Gym 2 You from personal injury or accident of any sort or nature suffered by participants, the undersigned, by reason of participation or membership in classes, lessons or any program or activities of Gym 2 You.

I, the minor's parent and/or guardian, understand the nature of these activities and the minor's experience and capabilities and believe the minor to be qualified, in good health, and in proper physical condition 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 be caused, in whole or in part by negligent rescue operations. I further agree that if, despite this release, I, the minor, or anyone on the minor's behalf makes a claim against any of the releases names above, I will indemnify, save, and hold harmless each of the releases from any litigation expenses, attorney fees, loss, liability, damage, or cost that may incur as the result of any such claim.

I/WE HAVE READ THE FOREGOING AND UNDERSTAND THAT IT'S TERMS INCLUDE MY/OUR CONSENT AND MY/OUR AGREEMENT TO TAKE CERTAIN ACTIONS, TO ASSUME CERTAIN RESPONSIBILITIES AND TO RELEASE GYM 2 YOU FROM CERTAIN LIABILITY . I/WE SIGN IT VOLUNTARILY WITH FULL KNOWLEDGE OF IT SIGNIFICANCE.

Parent/Guardian signature Relationship to Participant Date Employee initial