



## Special Events – Athlete Contact Information & Waiver

### PARENT/GUARDIAN INFORMATION:

Parent's Name: \_\_\_\_\_ Parent's Cell Phone: \_\_\_\_\_

Parent's Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Parent's Email: \_\_\_\_\_

### PARTICIPANT'S INFORMATION:

Full Name (first, middle, & last): \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_\_

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

In consideration of the services of Ace Gymnastics, coaches, owners, officers, employees, and all other persons or entities acting on its behalf, I hereby agree to release and discharge Ace Gymnastics, on behalf of myself, my children, my parents, my heirs, assigns, personal representative and estate as follows:

I understand and acknowledge that the activity my child is about to engage in poses known risks and unanticipated risk which could result in injury, paralysis, death, emotional distress, or damage to my child, to property, or to third parties.

I expressly agree and promise to accept and assume all of the risks existing in this activity. My child's participation in this activity is purely voluntary, and I elect my child to participate in spite of the risks.

I hereby voluntarily release, forever discharge, and agree to indemnify and hold harmless Ace Gymnastics from any and all claims, demands, or causes of action, which are in any way connected with my child's participation in this activity or my use of the Ace Gymnastics' equipment or facilities, including any such claims which allege negligent acts or omissions of Ace Gymnastics.

Should Ace Gymnastics be required to incur attorney's fees and costs to enforce this agreement, I agree to indemnify and hold them harmless for all such fees and costs. I will be responsible for all Ace Gymnastics additional costs incurred, including, but not limited to, legal fees, collection agency fees, and administrative fees.

I certify that I have adequate insurance to cover any injury or damage my child may cause or suffer while participating, or else I agree to bear the costs of such injury or damage myself. I further certify that my child has no mental or physical conditions which could interfere with their safety in this activity, or else am willing to assume and bear the costs of all risks that may be related, directly or indirectly, by any such condition.

I, the undersigned, do hereby voluntarily submit my application for my child's attendance and participation with Ace Gymnastics.

I do hereby assume full responsibility for all damages, injuries, and/or losses that my child or myself may sustain or incur, if any, while participating, and I hereby waive all claims against Ace Gymnastics for any claims or injuries my child or I may sustain.

Parent / Legal Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Media Release

I hereby consent to the photographing of my child and the recording of my child's voice and the use of these photographs and/or recordings singularly or in conjunction with other photographs and/or recordings for advertising, publicity, commercial or other business purposes. I understand that the term "photograph" as used herein encompasses both still photographs and motion picture footage. Further, I understand others, with or without the consent of Ace Gymnastics may use and/or reproduce such photographs and recordings. I hereby release Ace Gymnastics and any of its associated or affiliated companies, their directors, officers, agents, employees and customers, and appointed advertising agencies, their directors, officers' agents and employees from all claims of every kind on account of such use.

Parent / Legal Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_