

KIDS KINGDOM SPORTS CENTER

Home of Euro Stars Gymnastics

ADULT TRIAL CLASS Club Waiver and Release Form

Participant(s) shall follow all Euro Stars Gymnastics, Inc. rules.

I represent and warrant that I am in good physical health and do not suffer from any medical condition which would limit my participation in the classes offered at Euro Stars Gymnastics. I understand that it is my responsibility to consult with a physician prior to and regarding my participation in any of the classes, programs, or workshops. I understand the risks associated with the activities offered by Euro Stars Gymnastics and I agree to follow all instructions so that I may safely participate in classes, workshops, or other activities

- a. There are risks and dangers associated with participation in gymnastics events and activities including but not limited to those of bodily injury, partial and/or total disability, paralysis and death;
 - b. The social and economic losses and/or damages, which could result from those risk and dangers described above, could be severe;
 - c. These risks and dangers may be caused by the negligence of the participant or the negligence of others; or the negligence or reckless actions of other participants who may not have complete control of their actions during participation in the gym.
 - d. There may be other risks not known to us or that are not foreseeable at this time.
1. I/we accept and assume such risks and responsibility for the losses and/or damages following such injury, disability, paralysis or death however caused or alleged to be caused in whole or in part.
 2. I/we agree that this Consent and Assumption of Risk Statement covers each and every event or activity sponsored by Euro Stars Gymnastics, Inc.
 3. In consideration for allowing the student/participant to participate I hereby release, waive and covenant not to sue Euro Stars Gymnastics, Inc. or its directors, officers, employees, coaches, teachers or agents from any and all present and future liability or claims, known and unknown, resulting in property damage, bodily injury or wrongful death arising as a result of my engaging in or receiving instruction in gymnastics or any other activities incidental thereof, whenever or however they may occur, including those claims of negligence, gross negligence or recklessness.
 4. I further agree to indemnify and hold harmless Euro Stars Gymnastics, Inc. and its officers, directors, coaches, teachers, employees and agents for any and all claims arising as a result of my engaging in or receiving instruction in Euro Stars Gymnastics, Inc. activities or any activities, incidental thereto whenever, or however the same may occur.
 5. I declare that I have not been advised by my medical professional to not participate in specific activities.
 6. I understand and acknowledge that I am fully responsible for any and all risks, injuries, or damages, known or unknown, which might occur as a result of my participation in the classes, workshops, or other activities. I have read the above release and waiver of liability and fully understand its content. I am legally competent to sign and voluntarily agree to the terms and conditions stated above.

I/WE HAVE READ THE ABOVE AND SIGN IT VOLUNTARILY

Trial Class Name

Signature

Date

Date of Birth

Print Name

Street Address

Emergency Contact Name and Phone

City/State/Zip code

Phone Number

Email Address