

NORTH FLORIDA GYMNASTICS AND CHEERLEADING

LIABILITY WAIVER AND RELEASE FORM

Parents MUST sign if student is under 18 years of age.

We, the staff of North Florida Gymnastics and Cheerleading recognize our obligations to make our students and their parents aware of the risks and hazards associated with the sport of gymnastics, tumbling, and cheerleading and dance. Students may suffer injuries, possibly minor, serious, or catastrophic in nature. Gymnastics, Tumbling and Cheerleading can be dangerous and can lead to injury.

Parents should make their children aware of the possibility of injury and encourage their children to follow all the safety rules and the coaches' instructions.

North Florida Gymnastics, it's coaches and other staff members will not accept responsibility for injuries sustained by any student during the course of gymnastics, tumbling, dance or cheerleading instruction, or open workouts, or in the course of any exhibition, competition, or clinic in which he or she may participate or while traveling to or from the event.

With the above in mind, and being fully aware of the risks and possibility of injury involved, I consent to have my child or children participate in programs offered by North Florida Gymnastics. I, my executors or other representatives, waive and release all rights and claims for damages that I or my child may have against North Florida Gymnastics and or it's representatives whether paid or volunteer.

I also affirm that I now have and will continue to provide proper hospitalization, health, and accident insurance coverage, which I consider adequate for both my child's protection and my own protection.

I also understand that it is the parents' responsibility to warn the child about the dangers of gymnastics and injury. The parent should warn the child according to what the parent feels is appropriate. North Florida Gymnastics will only warn the child through "Safety Messages" and our teaching style and progressions.

Eligibility: I agree to comply with the rules of **North Florida Gymnastics and Cheerleading.**

1. Readiness to participate: I will only participate in those **North Florida Gymnastics and Cheerleading** classes, events, and activities for which I believe I am physically and psychologically prepared. Prior to participation, I will have practiced my exercises and will perform only those exercises, which I have accomplished to the degree of confidence necessary to assure that I can perform them by myself, and without injury.
2. Medical attention: I hereby give my consent to **North Florida Gymnastics and Cheerleading** to provide, through the medical staff of it's choice, customary medical/athletic training attention, transportation, and emergency medical services as warranted in the course of my participation.
3. Waiver and release: I am fully aware of and appreciate the risks, including the risk of catastrophic injury, paralysis, and even death, as well as other damages and losses associated with participation in gymnastics and cheerleading activities and events.

I further agree that **North Florida Gymnastics and Cheerleading**, and the sponsor of any **North Florida Gymnastics and Cheerleading** event along with the employees, agents, officers, directors and owners of these organizations, shall not be liable for any losses or damages occurring as a result of my participation in the event. I assume all risks associated with participation in the sport of gymnastics and/or cheerleading, including any accidental injury that may be sustained as a result of, or incidental to gymnastics or cheerleading instruction, now or any time in the future, seen or unforeseen. I hereby release **North Florida Gymnastics and Cheerleading**, it's owners and employees, jointly and separately, from any and all personal injury claims arising through or from participation in activities as a student of **North Florida Gymnastics and Cheerleading** in or upon the premises of **North Florida Gymnastics and Cheerleading**. **North Florida Gymnastics and Cheerleading** recommends a Doctor's physical for participation in gymnastics and cheerleading for your child's benefit.

For any athlete that is not yet 18 years old: As legal parent or guardian of this athlete, I hereby verify by my signature below that I fully understand and accept each of the above conditions for permitting my child to participate in classes, events, competitions, and activities conducted by **North Florida Gymnastics and Cheerleading**.

Participant Name _____ Age _____

Address _____

City _____ State _____ Zip _____

Printed Name of Parent Or Guardian _____ Phone _____

Signature of Parent Or Guardian _____ Today's Date _____

*****OFFICE USE ONLY*****

Class Code _____ Class Date _____ Instructor _____