

*Challenging Minds in Motion*



## Waiver of Liability

As parent or legal guardian of \_\_\_\_\_ (students name), I give my consent for him/her to participate in the programs at Pacific West Gymnastics, Inc. I understand that participation in gymnastics, trampoline, cheerleading, tumbling, and related activities always involves certain risks, and may result in unavoidable injuries due to the height, rotation, and motions involved in an unique environment. These injuries may include muscle strains and tears, broken bones, and severe injuries including, but not limited to, permanent paralysis or even death. I am fully aware of the risks and possibility of injury involved. As a parent or legal guardian, I agree to provide health insurance for the minor child or guarantee payments of any and all medical expenses incurred as a result of training, performing or participating in activities of Pacific West Gymnastics, Inc. I understand it is this gym's express intent to provide for the safety and protection of my child and in consideration for allowing the above named minor child (or adult if over 18) to participate in activities with Pacific West Gymnastics, Inc., the Board of Directors and officers, the Pacific West Gymnastics Parents Club, and any of their employees, instructors, coaches, or agents, for any injuries suffered by my child and other damages suffered by my child or myself while on the premises or under the supervision or control of Pacific West Gymnastics, Inc. and it's employees. It is also my intent to release Pacific West Gymnastics, Inc. and its employees from liability for future negligent conduct. This acknowledgement of risk and WAIVER OF LIABILITY has been read by me and understood completely and signed voluntarily. I am 18 years of age or older.

Childs Name \_\_\_\_\_ Birthday \_\_\_\_\_  
Address \_\_\_\_\_  
Phone Number \_\_\_\_\_  
Parents Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_