Flagstaff Gymnastics and Cheer Waiver and Release

Student Name		GenderBirthday				
Student Name		GenderBirthday				
Address	_City			_State	Zip	
Mother's Name		_Phone _			Texting:	Yes or No
Email:						
Father's Name		_Phone _			Texting:	Yes or No
Email:						
Alternate Emergency Contact		Phone	e	Re	elation	
Physical Restrictions		Insurance Provider				

Waiver of Liability and Assumption of Risk

In consideration of allowing the previously-declared student(s) to begin participation in Flagstaff Gymnastics and Cheer activities, while on the premises and property of said business, the undersigned, for themselves, and/or being the legal and acting guardian of student, acting for themselves and on behalf of the student, release and hold harmless Flagstaff Gymnastics and Cheer, LLC, its owners, members, employees, and agents of and from any and all liability, claims, demands, and causes of action whatsoever, arising out of or related to any loss, damage, or injury, including death, that may be sustained by the student and/or the undersigned, while in or upon the premises upon which Flagstaff Gymnastics and Cheer, LLC is conducted, or any premises under the control and supervision of Flagstaff Gymnastics and Cheer, LLC, its owners, members, employees, or agents or in route to or from any of said premises, or while at any premises or place where activities sponsored by or participated in by Flagstaff Gymnastics and Cheer, LLC, its owners, members, agents, or employees.

Participation in physical activities can involve motion, rotation, and height in a unique environment and as such carries with it a certain assumption of risk. The undersigned choose to voluntarily enter upon said premises under the control of said company, knowing their present condition and knowing that said condition may become hazardous and dangerous during the time the student or the undersigned is upon said premises. The undersigned voluntarily assumes any and all risks of loss, damage, or injury that may be sustained by the student and/or the undersigned or any property owner by them while on or upon said premises described above. The undersigned agrees to provide for the possible future medical expenses that may be incurred by the student or the undersigned as a result of any injury that may be sustained. In signing this Release, the undersigned acknowledges:

a) That he/she has read thoroughly and understands completely, the terms of participating and signs it voluntary.

b) That the undersigned signing either for themselves, or as Legal Guardian is, in fact, the true and legal guardian and has the consent of the participant.
Parent/Guardian Signature _____Date_____

Medical Release

The undersigned gives permission for Flagstaff Gymnastics and Cheer, LLC, owners, members, employees, and/or agents to seek emergency medical treatment for the participant(s) in the event they are unable to reach any parent or guardian. The undersigned also agrees that they themselves will be responsible for any financial debt incurred by said action. incurred by said action.

 Parent/Guardian Signature
 Date

Marketing Release

Occasionally Flagstaff Gymnastics and Cheer, LLC uses photos or videos of its students in print ads, on its website, in slide shows, and other marketing mediums. I give permission for my child's likeness to be used in such advertising.

Parent/Guardian Signature Date