

Signature of Parent/Guardian

CALEDONIA GYMMIES CLASS VISIT WAIVER

10 Kinross Street East, Caledonia, ON, N3W1E2 – www.gymmies.com

CALEDONIA	
ALL PORTI	ONS MUST BE COMPLETED BEFORE CHILD IS PERMITTED TO PARTICIPATE
CHILD'S LAST NAME:	FIRST NAME:
RELEASE OF LIABILITY, W	AIVER OF CLAIMS ASSUMPTION OF RISKS AND INDEMNITY AGREEMENT
By signing this document	you will waive certain legal rights, including the right to sue.
Awareness and Assumpt	cion of Risk
and related loss, includin directors, officers, officia activities occur (referred	t involves risks including risk of personal injury, death, property damage, expense, g loss of income. Included in these risks are negligence on the part of Gymmies, its ls and volunteers, other participants, and owners of the facilities where the to in the rest of this agreement as "Gymmies and "Others". I freely accept and s and the possibility of personal injury, death, property, damage, expense, and so of income.
Release of Liability, Wai	ver of Claims, and Indemnity Agreement
In consideration of Gymr	nies accepting my application to participate in this activity, I agree:
1. To waive any and all claims that I may have in future against Gymmies and others.	
damage, expense and re	es and others from any and all liability for any personal injury, death, property, lated loss of income that I or my next of kin may suffer as a result of my ity due to any cause whatsoever, including negligence, breach of contract or luty of care.
	ndemnify Gymmies and others from any and all liability for any damage to injury to, any third party, resulting from my participation in this activity.
4. That this agreement is and assigns.	binding on not only myself but my next of kin, heirs, executors, administrators,
AM WAIVING CERTAIN F	EMENT AND UNDERSTAND IT. I AM AWARE THAT BY SIGNING THIS DOCUMENT I RIGHTS WHICH I OR MY NEXT OF KIN, HEIR, EXECUTORS, ADMINISTRATORS AND AINST GYMMIES AND OTHERS.
[] Yes [] No	

Print Parent/Guardian Name

Date: