

Pacific Stars Rhythmic Academy Waiver of Liability

I, THE MINOR'S PARENT AND/OR LEGAL GUARDIAN, UNDERSTAND THE NATURE OF THE ACTIVITY AND THE MINOR'S EXPERIENCE AND CAPABILITIES AND BELIEVE THE MINOR TO BE QUALIFIED, IN GOOD HEALTH, AND IN PROPER PHYSICAL CONDITION TO PARTICIPATE IN SUCH ACTIVITY. I recognize that potentially severe injuries, including permanent paralysis or death can occur in sports or activities involving height or motion, including, but not limited to gymnastics, tumbling and ball sports. Being fully aware of these dangers, I voluntarily consent to the aforementioned person participating in any and all Pacific Stars Rhythmic Academy gym activities and I ACCEPT ALL RISKS associated with that participation. I HEREBY RELEASE, DISCHARGE, COVENANT NOT TO SUE AND FOREVER RELEASE PACIFIC STARS RHYTHMIC ACADEMY, IT'S OFFICERS, DIRECTORS, SHAREHOLDRES, EMPLOY-EES OR AGENTS, AND AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS EACH OF THE RELEASEE'S FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON THE MINOR'S ACCOUNT CAUSED, OR ALLEGED TO BE CAUSED, IN WHOLE OR IN PART BY NEGLIGENCE OF THE "RELEASEES" OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATIONS AND FURTHER AGREE THAT IF, DESPITE THIS RELEASE, I, THE MINOR, OR ANYONE ON THE MINOR'S BEHALF MAKES A CLAIMS AGAINST ANY OF THE RELEASEES NAMED ABOVE, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES FROM ANY LITIGATION EXPENSES, ATTORNEY FEES, LOSS LIABILITY, DAMAGE, OR ANY COST THAT MAY OCCUR AS A RESULT OF ANY SUCH CLAIM. I have read and understood this ASSUMPTION OF RISK and WAIVER OF LIABILITY and VOLUNTARILY affix my name in agreement.

Gymnast Name	Date	_
Parent/Guardian Name		_
Parent/Guardian Signature	· · · · · · · · · · · · · · · · · · ·	_
Parent/Guardian Emergency Contact Number		