

**Parents Night Out, Birthday Party or Open Gym Waiver**

Legal Guardian Name: \_\_\_\_\_ Participant's Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_ Participant DOB: \_\_\_/\_\_\_/\_\_\_ Sex: M / F

Emergency Name: \_\_\_\_\_ Phone: \_\_\_\_\_

**Release**

**I understand this opportunity is for gym time and not for instruction by Pinnacles Gymnastics. Any instructions given by professionals or non-professionals are not related to Pinnacles Gymnastics. Participant and Legal Guardian assume all liability for instruction or absence of instruction, or information by any individual during this open gym time, whether on their own or by another individual. I understand that gymnastics, cheerleading and dance involve certain inherent risks, including the potential for personal injuries of all kinds, paralysis, or even death. Therefore, I assume all responsibility in allowing my child to participate, In consideration of Pinnacles giving this open gym opportunity to my child, I hereby, for myself, my heirs, executors, administrators, and assigns, waive and release any and all rights and claims for damage I have against Pinnacles Gymnastics, persons sponsoring their program, their agents, representatives, successors, and assigns for any and all injuries and losses suffered by me and mine at said programs, additionally, I agree to indemnify Pinnacles Gymnastics for any lawsuit or financial loss occurring, directly or indirectly, from my child's participation there. Pinnacle Gymnastics has my permission to render any necessary first aid emergency treatment to my child while in attendance there.**

**By affixing my signature below, I agree to, have read, and understand the terms of this agreement entirely and agree to abide by its terms.**

**Legal Guardian Signature: \_\_\_\_\_ Date: \_\_\_ / \_\_\_ / \_\_\_**