



**RELEASE OF LIABILITY; ASSUMPTION OF RISKS; AND COVENANT NOT TO SUE**

*THIS RELEASE IS A BINDING LEGAL CONTRACT, PLEASE READ IT CAREFULLY. THIS RELEASE SHALL BE CONTINUING BINDING UNTIL WITHDRAWN IN WRITING BY EITHER PARTY. IN ORDER FOR YOU TO PARTICIPATE IN ANY ACTIVITIES IN ANY WAY CONNECTED TO ELECTRIC CITY GYMNASTICS, YOU MUST CERTIFY THAT YOU AGREE TO THE TERMS CONTAINED HEREIN:*

**Adult Participant, Parent or Legal Guardian (one adult per waiver)**

**My Name:** \_\_\_\_\_ **My Birthdate:** \_\_\_/\_\_\_/\_\_\_ **Phone:** \_\_\_\_\_

**I am the** \_\_\_\_\_ **to the following child(ren):**

**Child's Name:** \_\_\_\_\_ **Birthdate:** \_\_\_/\_\_\_/\_\_\_

**Child's Name:** \_\_\_\_\_ **Birthdate:** \_\_\_/\_\_\_/\_\_\_

**Child's Name:** \_\_\_\_\_ **Birthdate:** \_\_\_/\_\_\_/\_\_\_

**Child's Name:** \_\_\_\_\_ **Birthdate:** \_\_\_/\_\_\_/\_\_\_

**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Alternative Emergency Contact:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Electric City Gymnastics Rules**

- Everyone must sign a waiver before entering the gym facility.
- Be aware of your neighbors. The gym can be very busy at times and it is YOUR responsibility to be aware of fellow gymnasts. No gymnastic activities directly above or below other gymnasts.
- No smoking or alcoholic beverages. No food or drinks in gym area.
- When attempting any acrobatic skill, a spotter is recommended.
- No unauthorized running or horseplay in the gym facility.

Electric City Gymnastics reserves the right to deny facility access to any individual or groups permanently or for a specified period of time for breach of contract in following the safety rules, or for any conduct that is viewed by Electric City Gymnastics as unsafe or inappropriate.

I, the undersigned, recognize the dangers inherent in gymnastics. I am voluntarily assuming all the risks since I wish to participate in gymnastics. I realize I am subject to injury from this activity, and that no form of preparing can remove all of the danger to which I am exposing myself. I am aware of the safety policy.

**PARTICIPANT AND PARENT OR GUARDIAN AGREEMENT, RELEASE, AND ACKNOWLEDGMENT OF RISK**

In consideration of the services of Electric City Gymnastics, their agents, owners, officers, volunteers, participants, employees, and all other persons or entities acting in any capacity on their behalf (hereinafter collectively referred to as "ECG"), I hereby agree to release and discharge ECG, on behalf of myself, my children, my parents, my heirs, assigns, personal representatives, and estate as follows:

I ACKNOWLEDGE THAT GYMNASTICS ENTAILS KNOWN AND UNANTICIPATED RISK, WHICH COULD RESULT IN PHYSICAL OR EMOTIONAL INJURY, PARALYSIS, DEATH, OR DAMAGE TO MYSELF, TO PROPERTY, OR TO THIRD PARTIES. I UNDERSTAND THAT SUCH RISKS SIMPLY CANNOT BE ELIMINATED WITHOUT JEOPARDIZING THE ESSENTIAL QUALITIES OF THE ACTIVITY. THESE RISKS INCLUDE BUT ARE NOT LIMITED TO THE GROUND, OTHER USERS, OR BEING FALLEN ON BY OTHER USERS; ABRASIONS FROM THE WALLS, ROPES, PADS, GYMNASTIC EQUIPMENT OR THE FLOOR; EQUIPMENT FAILURE OR SPOTTER FAILURES; ATTEMPTING SKILLS OUT OF CONTROL OR BEYOND ONE'S PERSONAL LIMITS; THE NEGLIGENCE OF OTHER GYMNASTS, VISITORS, PARTICIPANTS, OR OTHER PERSONS WHO MAY BE PRESENT; MUSCULOSKELETAL INJURIES AND/OR OVER TRAINING; HEAD INJURIES; OR MY OWN NEGLIGENCE.

