

Office Use Only

Trialing \_\_\_\_\_ Day \_\_\_\_\_

Arctic Gymnastics, LLC Registration & Liability Waiver Form

Student's First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_
Sex: M or F Birth date: \_\_\_\_\_
School: \_\_\_\_\_ Grade: \_\_\_\_\_
Medical Info: (Allergies, past injuries, special info)

Physician Name: \_\_\_\_\_
Preferred Hospital: \_\_\_\_\_

Contact #1 First Name : \_\_\_\_\_ Last Name: \_\_\_\_\_
Mother or Father
Home Phone: \_\_\_\_\_ Cell #: \_\_\_\_\_ Work: \_\_\_\_\_
Email: \_\_\_\_\_@\_\_\_\_\_

Contact #2 First Name : \_\_\_\_\_ Last Name: \_\_\_\_\_
Mother or Father
Home Phone: \_\_\_\_\_ Cell #: \_\_\_\_\_ Work: \_\_\_\_\_
Email: \_\_\_\_\_@\_\_\_\_\_

Address: \_\_\_\_\_ Apt. \_\_\_\_\_
City: \_\_\_\_\_ Alaska \_\_\_\_\_
Emergency Contact Info: (Other than Parents)

Health Insurance Carrier: \_\_\_\_\_

Participant Release and Waiver of Liability, Assumption of Risk, and Indemnity Agreement ("Agreement") In consideration of participation in the Arctic Gymnastics LLC programs I represent that I understand the nature of this activity and that I am qualified, in good health, and in proper physical condition to participate in such activity.

I hereby release, discharge, and covenant not to sue Arctic Gymnastics, LLC, its respective administrators, directors, agents, officers, volunteers, and employees, other participants, any sponsors, advertisers, and if applicable, owners and lessor of premises on which the activity takes place (each considered one of the "releases" herein) from all liability, claims, demands, losses, or damages, on my account caused or alleged to be caused in whole or in part by the negligence of the releases or otherwise, including negligent rescue operations, and further agree that if, despite this release, waiver of liability, and assumption of risk, I or anyone on my behalf, makes a claim against any of the releases, I will indemnify, save, and hold harmless each of the releases from any loss, liability, damage, or cost, which

I have read the Release and Waiver of Liability, Assumption of Risk, and Indemnity Agreement ("Agreement"), understand that I have given up substantial rights by signing it, including the right to sue for negligence or any other tort, and I have signed it freely and without any inducement or assurance of any nature and intend it to be a complete and unconditional release of all liability to the greatest extent allowed by law and agree that if any portion of this agreement is held to be invalid the balance, notwithstanding, shall continue in full force and effect.

PRINTED NAME OF PARTICIPANT SIGNATURE OF PARTICIPANT DATE

-IF PARTICIPANT IS A MINOR-

PARENTAL CONSENT

And, I the minor's parent and/or legal guardian, understand the nature of the above referenced activities and the minor's experience and capabilities and believe the minor to be qualified to participate in such an activity, I hereby release, discharge, covenant not to sue and AGREE TO INDEMNIFY, SAVE AND HOLD HARMLESS each of the releases from liability, claims, demands, losses, or damages on the minor's account caused or alleged to have been caused in whole or in part by the negligence of the Releases or otherwise to maintain the equipment or premises or to conduct the activities, including negligent rescue operations, and further agree that if, despite the release, I, the minor, or anyone on the minor's behalf makes a claim against any of the above Releases, I WILL INDEMNIFY, SAVE AND HOLD HARMLESS each of the Releases from any litigation expenses, attorney fees, loss liability, damage, or cost any releases may incur as the result of any such claim.

PRINTED NAME OF PARENT/OR LEGAL GUARDIAN SIGNATURE OF PARENT/OR LEGAL GUARDIAN DATE

Office Use: Date Trial \_\_\_\_\_ Date Enrolled \_\_\_\_\_ Class \_\_\_\_\_