

Registration Form for Adult Participants
North County Gymnastics & the Gymninny Kids
17022 Camino San Bernardo
San Diego, CA 92127

Enrollment Date: _____ Birthday ____/____/____

First Name Last Name

Address _____ City _____ Zip _____

Home Phone (_____) _____ - _____ Cell Phone (_____) _____ - _____

Email Address: _____

Medical Insurance: _____ Policy Number: _____

Emergency Information: (Must be filled out completely)

Doctor _____ Phone _____

Address _____ Hospital Preference _____

Emergency Contact _____ Phone _____

Gymnasts Medical History:

Allergies _____

Medications regularly taken _____

Chronic medical problems _____

Any past broken bones _____

Any past surgeries _____

Any problems we should be aware of in order to better teach you?



ADULT CLASS

RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT ("AGREEMENT")

In consideration of participating in the ADULT CLASS,

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 acknowledge that if I believe event conditions are unsafe, I will immediately discontinue participation in the Activity.

I fully understand that this Activity involves risks of serious bodily injury, including permanent disability, which may be caused by my own actions, or inactions, those of others participating in the event, the condition in which the event takes place, or the negligence of the "releases" named below; and that there may be other risks either not known to me or not readily foreseeable at this time: and I fully accept and assume all such risks and all responsibility for losses, cost, and damages I incur as a result in the Activity.

I hereby release, discharge, and covenant not to sue North County Gymnastics & The Gymninny Kids, its respective administrators, directors, agents, officers, volunteers, and employees, other participants, any sponsors, advertisers, and, if applicable, owners and lessors of premises on which the activity takes place, (each considered one of the "RELEASEES" 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 "releasees" or otherwise, including negligent rescue operations and future agree that if, despite this release, waiver of liability, and assumption of risk I, or any one on my behalf, makes a claim against any of the Releasees, I will indemnify, save,



and hold harmless each of the Releasees from any loss, liability, damage, or cost, which any may incur as the result of such claim.

I have read the RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT, understand that I have given up substantial rights by signing it and 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

Signature

Date