



## ***Buckeye Gymnastics Special Event Waiver***

**This waiver must be signed by a parent or legal guardian prior to participation. If a child does not have a signed waiver, they will not be allowed to participate.**

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**Phone Number** \_\_\_\_\_  
**Child's Name** \_\_\_\_\_  
**Email Address** \_\_\_\_\_

### **ACKNOWLEDGEMENT OF RISK, WAIVER OF LIABILITY COVENANT NOT-TO-SUE AND INDEMNIFICATION AGREEMENT**

I/We \_\_\_\_\_ (Parent's Name) are the parents of \_\_\_\_\_ (Child's Name) As the parent or legal guardian of the named child, I hereby consent to his/her participation in the programs and classes offered at Buckeye Gymnastics, Inc. By the very nature of the activity gymnastics, cheerleading, and trampoline all carry a risk of physical injury. No matter how careful the student and coach, no matter how many spotters are used, no matter how skilled the student or coach, no matter how many mats are provided, and no matter how many times the skill has been performed successfully, the risk cannot be eliminated. Reduced, yes, but never eliminated. In consideration of being allowed to participate, **I ASSUME THAT RISK AND ALL OTHERS BOTH KNOWN AND UNKNOWN.**

In consideration of my child's participation, I hereby release and covenant not-to-sue Buckeye Gymnastics, Inc., or its Board of Directors, the officers, employees, teachers, coaches, or agents, from any and all present or future claims resulting from accidents or ordinary negligence on the part of Buckeye Gymnastics, Inc. or others listed for property damage or personal injury arising as a result of my child's participation in gymnastics, cheerleading, trampoline or any other activities or any activities incidental thereto while at Buckeye Gymnastics, wherever, whenever, or however the same may occur to the fullest extent of the law.

As the parent or guardian of the named child, I hereby agree to 100% individually protect for the possible future medical expenses plus any additional and related expenses which may be incurred by my child as a result of an injury sustained while participating in any program of instruction, recreation, birthday party, camp, special event or competition at, for, or under the direction or control of Buckeye Gymnastics, Inc.

Buckeye Gymnastics reserves the right to use any video or photographic material that may contain images of your child for any lawful purpose. By signing this form I also I agree to the use of these images for the purpose stated.

This Acknowledgement of Risk, Waiver of Liability, Covenant Not-To-Sue, and Indemnification Agreement shall be ongoing and shall apply during all the years that the above named student participates in activities under the direction or control of Buckeye Gymnastics, Inc. This Acknowledgement of Risk, Waiver of Liability, Covenant Not-To-Sue and Indemnification Agreement, having been read thoroughly and understood completely is signed voluntarily as to its content and intent.

Print Name of Parent \_\_\_\_\_ Date \_\_\_\_\_

Signature of Parent \_\_\_\_\_

Child's Signature if over 18 years of age \_\_\_\_\_