

Hunt's Gymnastics Academy & SportsZone Waiver Form

Assumption of Risk, Release, Waiver of Liability Photo Release and Medical Authorization

I recognize that there are risks and hazards associated with the sports of gymnastics, tumbling, cheerleading and dance. I understand that my child (ren) may suffer severe or catastrophic injuries associated with these activities including permanent paralysis or death. Being fully aware of and appreciating the risks involved in these activities, I hereby consent for my child (ren) to participate in any and all Hunt's Gymnastics Academy and SportsZone L.L.C classes, event, competitions and activities. I acknowledge that I have made my child (ren) aware of the possibility of such injuries. I ACCEPT ALL RISKS associated with my child (ren)'s participation in these activities. In consideration for my child (ren)'s participation, I hereby, for my child (ren) and their heirs and successors PROMISE NOT TO SUE AND FOREVER RELEASES, Hunt's Gymnastics Academy & SportsZone L.L.C, its officers, directors, shareholders, employees, contractors and volunteers from liability resulting in damages and injuries incurred as a result of participation in the above referenced activities including those resulting from acts of negligence. I fully understand the Hunt's Gymnastics Academy & SportsZone L.L.C., staff members are not physicians or medical practitioners of any kind. With the above in mind, I hereby authorize Hunt's Gymnastics Academy and SportsZone L.L.C., staff to seek medical help, including transportation by Hunt's Gymnastics Academy and SportsZone L.L.C., staff or ambulance to a health care facility or hospital. Additionally, I hereby agree to individually provide for all medical expenses which maybe be incurred by my child (ren) as a result of any injury sustained while participating in activities with Hunt's Gymnastics Academy & SportsZone L.L.C. I am aware that individual and group publicity photos and videos are taken from time to time and inconsideration for my child (ren)'s participation, I hereby grant my permission for my child (ren)'s likeness to be used in Hunt's Gymnastics Academy and SportsZone L.L.C., publicity or advertising. I, as the legal parent or guardian of

_____, verify by my signature below that I have read and I fully understand and accept each of the above conditions set forth in this ASSUMPTION OR RISK, RELEASE, WAIVER OF LIABILITY, PHOTO RELEASE, AND MEDICAL AUTHORIZATION.

(Print) _____ Parent and/or Guardian Name

(Sign) _____ Parent and/or Guardian Signature

Date: _____

Our facility is location at Hunt's Gymnastics Academy & SportsZone

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