



104 Potter Lane Delmont, PA 15626

REGISTRATION FORM & LIABILITY WAIVER

First Name of Child	Last Name of Child	Date of Birth	Gender
			<input type="checkbox"/> Male <input type="checkbox"/> Female
			<input type="checkbox"/> Male <input type="checkbox"/> Female
			<input type="checkbox"/> Male <input type="checkbox"/> Female

Parent/Guardian:	Phone:	Cell:
Address:		
Email Address:		
Insurance Company Name:	Phone:	
Emergency Contact (Other than Parent/Guardian):	Phone:	
Program Signing up For:	Day/Time	

Name on Card:	Card Type: Visa MasterCard Discover	Exp:	CVV:
Card #	Billing Address if different than above:		

I authorize Ultimate Gymnastics, LLC to enter the above information into their website at which time I will receive an email to create a password for log in. Credit card information will not be used other than for the intended purpose of entering into account for monthly tuition.

Signature: _____ Date: _____

WARNING!!

In consideration for the use of services, facilities, or equipment provided by Ultimate Gymnastics, LLC. (here after referred to as Ultimate Gymnastics), the participant hereby releases Ultimate Gymnastics, its subsidiaries, affiliates, partners, officers, directors, employees, agents and volunteers (and each of their respective heirs, assigns and legal representatives), on behalf of the participant or his or her heirs, assigns and legal representatives, from any and all liability for negligence, bodily injuries, death or property damage to participant, arising out of participant's use or presence upon property or services of Ultimate Gymnastics.

The participant at Ultimate Gymnastics understands, acknowledges and agrees that acrobatics, gymnastics, cheerleading and tumbling are dangerous activities and can result in injury to the person, damage to their property or to third parties. The participant is aware of these risks inherent in engaging in or observing any activity at or provided by Ultimate Gymnastics regardless of how careful the participant, staff or safety equipment used. Risked can be reduced, but never eliminated.

The participant voluntarily assumes all risk of loss, damage or injury while on premises. **The participant acknowledges that there are various degrees of skill and experience required for the different activities and the participant will abide by the rules for the use of various activities including not using any equipment without an instructor present and following all instructions of staff members.** Failure to follow rules and instructions from staff may result in termination of participation without refund.

The participant agrees to indemnify Ultimate Gymnastics against, and save it harmless from any and all damages, actions, claims, judgments of litigation and attorney fees, which may result from the participant's use of or presence upon the property or facility of Ultimate Gymnastics, including damage to the equipment used by Ultimate Gymnastics.

I hereby authorize Ultimate Gymnastics to act for me according to their best judgment in any emergency requiring medical attention. All medical expenses incurred will be the responsibility of the participant or participant's family. I certify to Ultimate Gymnastics that I have no physical condition or mental impairment that would be affected by participation in activities of Ultimate Gymnastics. I permit Ultimate Gymnastics to take photographs and video while I am on the premises of Ultimate Gymnastics or engaged in activity or event sponsored, promoted or organized by Ultimate Gymnastics for publicity, advertising or any legitimate purpose.

By signing this waiver and assumption of risk and release, I acknowledge that I have read the above release and fully understand its contents. I am to be bound by the terms of the release and understand that any and all risks, whether known or unknown, are expressly waived in advance. I confirm that the participant is covered by insurance to cover any injury or damages I may suffer, cause or else I agree to bear the costs for such injury or damage to myself or others.

PARENT OR GUARDIAN MUST SIGN IF PARTICIPANT IS UNDER THE AGE OF 18

Signature of Parent/Legal Guardian _____ Date: _____

Print Name of Parent/Legal Guardian _____ Relationship to Participant _____