

BIG EAST GYMNASTICS
125 Camelot Drive, Plymouth, MA 02360
(508) 746-5797

REGISTRATION FORM

FIRST CHILD:

First Name: _____ Last Name: _____ DOB: _____

SECOND CHILD:

First Name: _____ Last Name: _____ DOB: _____

Address: _____

Town: _____ State: _____ Zip: _____

Parent(s) Name: _____ Phone: _____

Emergency Contact: _____

Emergency Phone: _____ Relationship: _____

Medical Conditions: _____

ACKNOWLEDGEMENT OF RISK, WAIVER OF LIABILITY AND INDEMNITY AGREEMENT

I, _____, parent/guardian of _____
Give permission for said son's/daughter's participation in the class program at Big East Gymnastics. I understand that gymnastics is a sport that involves height and rotation of the body, therefore there are inherent risks involved. I attest to my son's/daughter's sound health of mind and body and I authorize Big East Gymnastics to seek medical treatment at the nearest medical facility in case of emergency. I hereby release, discharge, covenant not to sue, and agree to indemnify Big East Gymnastics, its Officers, Agents, Directors, and Employees ("Releasees") and save and hold harmless each of the Releasees from all liability, claims, demands, losses, expenses, or damages on the minors account caused or alleged to be caused in whole or in part by the negligence of the Releasees or otherwise and further agree that if, despite this release, I, the minor, or anyone in the minor's behalf makes a claim against any of the Releasees, I will indemnify, save and hold harmless each of the Releasees from any litigation expenses, attorney fees, loss liability, damage or cost that may incur as a result of any such claim. Furthermore, I have read and understand the rules and policies of Big East Gymnastics as explained on the backside of this form.

Parent/Guardian Signature: _____ **Date:** _____