

**PINELANDS GYMNASTICS ACADEMY**  
**2016-2017**

**PLEASE FILL OUT FRONT AND BACK**

**STUDENT/ FAMILY INFORMATION**  
**(PLEASE USE SEPARATE FORM FOR EACH STUDENT)**

STUDENT'S LAST NAME \_\_\_\_\_

STUDENT'S FIRST NAME \_\_\_\_\_

\_\_\_ BOY \_\_\_ GIRL          BIRTHDATE (mm/dd/yy) \_\_\_\_\_

LIST ANY MEDICAL PROBLEMS:

HOW DID YOU HEAR ABOUT US?

MAILING STREET ADDRESS \_\_\_\_\_

CITY/TOWN \_\_\_\_\_

STATE \_\_\_\_\_          ZIP CODE \_\_\_\_\_

HOME PHONE \_\_\_\_\_ CELL \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

PARENT/GUARDIAN'S FIRST NAME \_\_\_\_\_

PARENT/GUARDIAN'S LAST NAME \_\_\_\_\_

PARENT/GUARDIAN'S FIRST NAME \_\_\_\_\_

PARENT/GUARDIAN'S LAST NAME \_\_\_\_\_

EMERGENCY CONTACT: NAME \_\_\_\_\_

RELATIONSHIP \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_

**CLASS REQUEST AND ACKNOWLEDGEMENT**

ATTENDING: \_\_\_\_\_ SESSION #1 (SEPTEMBER 10TH- OCTOBER 20TH)  
\_\_\_\_\_ SESSION #2 (OCTOBER 22ND- DECEMBER 12TH)  
\_\_\_\_\_ SESSION #3 (DECEMBER 13TH- FEBRUARY 6TH)  
\_\_\_\_\_ SESSION #4 (FEBRUARY 7TH- MARCH 20TH)  
\_\_\_\_\_ SESSION #5 (MARCH 21ST- MAY 11TH)  
\_\_\_\_\_ SESSION #6 (MAY 13TH- JUNE 26TH)

CLASS \_\_\_\_\_ DAY \_\_\_\_\_ TIME \_\_\_\_\_

**DUAL RELEASE OF LIABILITY WAIVER**

Name of child participant (if under 18): \_\_\_\_\_

Name of adult participant/parent: \_\_\_\_\_

I, WE DESPITE ALL REASONABLE PRECAUTIONS IMPLEMENTED FOR SAFETY, AM (ARE) FULLY AWARE OF AND APPRECIATE THE RISKS, INCLUDING THE RISK OF CATASTROPHIC INJURY, PARALYSIS AND EVEN DEATH, AS WELL AS OTHER DAMAGES AND LOSSES ASSOCIATED WITH PARTICIPATION IN THE PROGRAMS OR ACTIVITIES. I (WE) KNOWINGLY AND WILLINGLY ASSUME ALL SUCH RISKS. CONSEQUENTLY, I (WE) HEREBY FOR MYSELF, HEIRS, EXECUTORS AND ADMINISTRATORS, DO WAIVE AND RELEASE ANY AND ALL RIGHTS AND CLAIMS FOR DAMAGES AGAINST THE OWNER, OPERATORS, COACHES AND OTHER MEMBERS OF PINELANDS GYMNASTICS ACADEMY, LLC FROM PERSONAL INJURY OR ACCIDENT OF ANY SORT OF NATURE SUFFERED BY ME (US), THE UNDERSIGNED, BY REASON OF PARTICIPATION OR MEMBERSHIP IN CLASSES, LESSONS OR ANY PROGRAMS OR ACTIVITIES OF PINELANDS GYMNASTICS ACADEMY, LLC.

PARTICIPANT SIGNATURE (IF OVER 18) \_\_\_\_\_

**MINOR RELEASE**

I, THE MINORS PARENT AND/ OR LEGAL GUARDIAN, UNDERSTAND THE NATURE OF THE ACTIVITIES AND THE MINOR'S EXPERIENCE AND CAPABILITIES AND BELIEVE THE MINOR TO BE QUALIFIED, IN GOOD HEALTH, AND IN PROPER PHYSICAL CONDITION TO PARTICIPATE IN SUCH ACTIVITY. I HEREBY RELEASE, DISCHARGE, COVENANT NOT TO SUE, AND AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS EACH OF THE RELEASEE'S FROM ALL LIABILITY CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON THE MINOR'S ACCOUNT, INCLUDING NEGLIGENT RESCUE OPERATIONS. IBFURTHER AGREE THAT IF, DESPITE THIS RELEASE, I, THE MINOR, OR ANYONE ON THE MINOR'S BEHALF MAKES A CLAIM AGAINST ANY OF THE RELEASEE NAMED ABOVE, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES FROM LITIGATION EXPENSES, ATTORNEY FEES, LOSS LIABILITY, DAMAGE, OR COST ANY MAY INCUR AS THE RESULT OF ANY SUCH CLAIM. I HAVE READ, UNDERSTAND AND AGREE TO COMPLY WITH PINELANDS GYMNASTICS ACADEMY RULES AND POLICIES.

\_\_\_\_\_  
SIGNATURE OF PARENT/ GUARDIAN

\_\_\_\_\_  
DATE

**PLEASE SIGN HERE TO INDICATE THAT YOU HAVE READ, UNDERSTAND AND AGREE TO COMPLY WITH PINELANDS GYMNASTICS ACADEMY RULES AND POLICIES.**

X \_\_\_\_\_

