

# Infinity Gymnastics Waiver

**Waiver and Medical Consent:** Infinity Gymnastics, its instructors/coaches, and Chautauqua Park LLC will not accept responsibility for injuries sustained by any participant during instruction of any program offered by Infinity Gymnastics and its facilities in or about the premises. I (the legal guardian or participant) recognize that potentially severe injuries can occur in sports or activities involving height or motion, included but not limited to gymnastics, tumbling, trampoline, cheerleading, dance, parties, and camp games and activities. With the above in mind, and being fully aware of risks and possibly or injury involved, I consent my child/children and myself to participate in the programs offered by Infinity Gymnastics. Participation is entirely my own choice and with the understanding of accidental injury or risk of, I hereby fully and forever release and discharge Infinity Gymnastics, gym operators, all associated programs, the owners, employees, volunteers, and agents from any and all claims, demands, damages, expenses, rights of action, present or future, resulting from or arising out of Infinity Gymnastics programs and its facilities.

In the event of an emergency requiring medical attention, I hereby grant permission to the personnel at Infinity Gymnastics or a physician or other hospital personnel designated by Infinity Gymnastics to administer first aid to my child/children or myself.

**Infectious Disease Waiver:** I acknowledge, understand, and agree that my child's participation in gymnastics may result in possible exposure to and illness from infectious diseases, including, but not limited to, MRSA, Influenza, COVID-19 and any mutation thereof. While particular rules, personal discipline and cleaning protocols are in place in an effort to reduce risk, it cannot be completely eliminated. The risk of serious illness or death does exist. I knowingly and freely assume all such risks, both known and unknown, even if arising from the negligence of myself, the releases or others, and assume full responsibility for my participation and exposure.

To further maintain the health and safety initiatives at Infinity Gymnastics I will do my part by refraining from entering the facility or sending my child(ren) to the facility if I/he/she shows any signs of sickness or illness.

Infinity Gymnastics has also modified the coaching techniques along with skills and drills to teach your child(ren) in a "hands-off" fashion until it is deemed safe to resume our typical coaching style. In addition, understand and acknowledge that in the event of a serious fall or potential injury a coach or instructor will fully attempt to mitigate that fall or injury which may result in some form of catching or spotting your child. That as well as other incidental contact may occur from time to time in the facility.

I have read, understand and explained the provisions in this waiver to my child(ren) including the risks of participation and personal responsibilities for adhering to the rules and regulations for protection against communicable diseases. On my behalf, and on behalf of my child(ren) I understand and accept these risks and responsibilities.

**Authorization for use of photos in advertising purposes only:** By enrolling your child in Infinity Gymnastics, you are also giving permission to use your child's photo, strictly and only for promotional advertising purposes.

Please complete the information below.

**\*\*By signing you are stating that you have read and understand all of Infinity Gymnastics waivers and accept all risks and responsibilities.**

<b>Childs Name:</b>	<b>DOB:</b>
<b>Parent(s) Name:</b>	<b>Contact #:</b>
<b>Emergency Contact:</b>	<b>Contact #:</b>
<b>Email:</b>	
<b>Medical Insurance Provider:</b>	<b>Date:</b>
<b>Parent/legal guardian Signature:</b>	

