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2019 Waiver & Release Form

We, the staff of JOHN'S ACADEMY OF GYMNASTICS/J.A.GYMNASTICS,LLC recognize our obligation to make our students and their parents aware of the risks and hazards associated with gymnastics/fitness. Participants may suffer injuries, possibly minor, serious, or catastrophic in nature. Gymnastics/Fitness can be dangerous and can lead to injury! Parents should make their children aware of the possibility of injury and encourage their children to follow all safety rules and the coaches' instructions. JOHN'S ACADEMY OF GYMNASTICS/J.A.GYMNASTICS,LLC, its coaches and other staff members, do not accept responsibility for losses, damages, or injuries sustained by any participants during the course of gymnastics/fitness instruction, or open workouts, or in the course of any clinic in which you participate, other than injuries caused by the gross negligence or willful misconduct of the JOHN'S ACADEMY OF GYMNASTICS/J.A.GYMNASTICS,LLC, its coaches and other staff members. With the above in mind, and being fully aware of the risks and possibility of injury involved, I consent to have my children participate in the programs offered by JOHN'S ACADEMY OF GYMNASTICS/J.A.GYMNASTICS,LLC. I, my executors or other representatives, hereby waive, release, and discharge all rights and claims for damages that my children may have and covenant not to sue JOHN'S ACADEMY OF GYMNASTICS/J.A.GYMNASTICS,LLC and or its employees and representatives whether paid or volunteer, on account of any damages sustained or injuries received. I, my executors or other representatives, also agree and shall indemnify, defend, and hold harmless JOHN'S ACADEMY OF GYMNASTICS/J.A.GYMNASTICS, LLC, their coaches and other staff members from and against any and all claims, costs, including reasonable attorney fees, court costs, damages, and expenses associated or alleged in any claims including claims brought for loss or damages by 3rd parties injured by me, or any 3rd party claims arising out of wrong doing, negligence, and/or breach of contract by me. I, my executors or other representatives also hold harmless and release and agree not to allege in any legal action that this agreement violates public policy, or that it is an exculpatory or rescission agreement, as I have been made aware of my rights under the agreement and have had an opportunity to negotiate the terms of the agreement. I also affirm that I now have and will continue to provide proper hospitalization, health and accident insurance coverage that are adequate for both my child's protection and my own protection. I also understand that it is my responsibility to know about the dangers of fitness and injury. JOHN'S ACADEMY OF GYMNASTICS, LLC will only warn the participants through "safety messages" and our teaching style and progressions.

Child's Name: _____ DOB: _____ AGE: _____

Parent/Guardian Name: _____

Parent/Guardian Signature: _____ Today's Date: _____

Address: _____ City: _____ Zip Code: _____

Phone: _____ Email: _____ (will not be shared)

How did you hear about J.A.Gymnastics LLC? _____

Your interests in J.A.Gymnastics LLC: (Circle below)

Recreational classes Birthday Party Open Gym Workshop/Clinic Tumbling Classes

Competitive Team Pre-Team XCEL Team Ninja/Tricking Other: _____