

ULTIMATE GYMNASTICS CENTER, LLC

3775 Peachtree Crest Drive • Duluth, GA 30097

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RELEASE and WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT ("AGREEMENT")

In consideration of participating in any program at Ultimate Gymnastics Center I represent that I understand the nature of this activity and that I am qualified, in good health, and in proper physical condition to participate in such an activity. I acknowledge that if I believe event conditions are unsafe, I will immediately discontinue participation in the activity. I fully accept and assume all such risks and all responsibility for losses, cost and damages I incur as a result of my participation in the activity. I hereby release, discharge, and covenant not to sue the above said Ultimate Gymnastics, its respective managers, administrators, directors, officers, volunteers, employees, other participants, any sponsors, advertisers, and if applicable, owners and lessors of premises on which the activity takes place from all liability, claims, demands, losses, or damages on my account.

ASSUMPTION OF RISK: Participation in gymnastics involves motion, rotation, and height in a unique environment and as such, carries with it a degree of risk. Catastrophic injury, paralysis, or even death can result from conduct of the activity. I hereby accept and assume such risks and responsibility for any losses and/or damages arising from any illness, injury, disability, paralysis or death of the above-named participant, however caused and whether caused in whole or in part by the negligence of Ultimate Gymnastics Center, its owners, coaches, or employees.

I have read the RELEASE and WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT, and understand that I have given up substantial rights by signing it and have signed it freely and without any inducement or assurance of any nature and intend it to be a complete and unconditional release of all liability to the greatest extent allowed by law and agree that if any portion of this agreement is held to be invalid balance, notwithstanding shall continue in full force and effect.

To be filled out by parent of Minor

Print name of Participant _____ Date _____

Signature of Participant _____

(if child is a minor - parent is to sign child's name)

PARENTAL CONSENT

I, The minor's parent and/or legal guardian, understand the nature of the above referenced activities waive and release any and all rights against Ultimate Gymnastics Center LLC, its respective administrators, directors, agents, officers, volunteers, employees, other participants, any sponsors, advertisers, and if applicable, owners and lessors of premises on which the activity takes place from all liability, claims, demands, losses, injury, or damages that may be suffered by me or my children (minor) in connection with our association or entry in gymnastics, or other activities sponsored by Ultimate Gymnastics Center, LLC. I also give permission for Ultimate Gymnastics to photograph and/or videotape my child for use of promotional materials, which could include print materials and/or our website. Full names are not printed unless permission is obtained. I have read the Ultimate Gymnastics Safety Rules (listed on the Brochure and that are posted throughout the gym and I understand and have explained these rules to my child.

Printed name of Parent/s _____ Date: _____

Parent Signature _____