



# Waiver and Release Form

Name: \_\_\_\_\_ D.O.B.: \_\_\_\_\_ (Yr./Mo./Day)

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Address: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Relationship: \_\_\_\_\_

## Release:

I, the undersigned, hereby agree to indemnify and save harmless, the **Pulsars Gymnastics Club of Newmarket** and their Officers, instructors, coaches, employees, members from and against all claims, demands, costs, damages, actions, suits, or proceedings arising out of participation of activities within the facility.

Although every effort will be made to provide a safe and enjoyable atmosphere, it must be recognized that there are inherent risks involved. If you have any doubt as to you or your child's suitability for participating, please consult your doctor.

I agree a supervising coach or staff member may ask me/my child to leave without warning, if I do not comply with the gym rules as posted, this includes but not limited to misuse of equipment and language profanities (NO REFUNDS WILL BE ISSUED).

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature if over 18 otherwise, Parent or legal guardian.

Pulsars Gymnastics Club • 1206 Ringwell Drive Unit 2 • Newmarket, ON L3Y 8V9  
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