

2010 OPEN GYM WAIVER & RELEASE

I am 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 gymnastics activities and events.

I waive and release all rights and claims for damages that I may have at anytime against Minnesota Flyers Gymnastics, Inc. for damages suffered by me or my child in connection with my association or entry in gymnastics or other activities sponsored by Minnesota Flyers Gymnastics, Inc.

Name of Participant _____

Address _____

City/State/Zip _____

Phone _____

Parent Name _____

Signature (parent or guardian) _____

Date _____

***This waiver MUST be signed before your child
may participate in OPEN GYM. Thank you.***