



Emilia's Acrobatics, Gymnastics and Cheerleading

9525 Berger Road, Columbia, MD 21046 • 410-381-7565 • www.eagcgym.com

Waiver & Release Form

STUDENTS NAME _____ PHONE _____

ADDRESS _____

IN CASE OF AN EMERGENCY, CONTACT _____ PHONE _____

SECONDARY CONTACT _____ PHONE _____

I fully understand that Emilia's Acrobatics and Gymnastics Training Center (EAGC) staff members are not physicians or medical practitioners of any kind. With this in mind, I hereby grants EAGC staff permission to render temporary first aid to me and/or my child(ren) in the event of any injury and/or illness. If deemed necessary by Emilia's, EAGC staff members may call our doctor and seek assistance from members and/or representatives (whether paid or volunteer) of any health care facility or hospital. I also grant permission for EAGC to call an ambulance for me and/or my child(ren) should circumstances call for this action. I waive any all claim(s) and/or right(s) for any legal action and/or to hold Emilia's liable for taking any action under this section. In addition, I will pay any and all reasonable attorney fees as well as cost(s) incurred by Emilia's for defending action under this section. I also will be solely responsible any and all medical cost(s) for treatment rendered under this section, and will hold EAGC harmless and not responsible for this possible cost(s).

The staff of EAGC recognizes their obligation to make the students and their parents aware of the risks and hazards associated with the sport of gymnastics, tumbling and sport acrobatics. Students may suffer some minor injuries and some more serious injuries in nature. Therefore, parents and students should be aware and make their child(ren) aware of the possibility of injury and encourage them to follow all safety rules and coaches' instructions.

I hereby release, waive, give up any and all claim(s) and/or right(s) against EAGC, staff and other agents and/or representatives and/or personnel of EAGC for damages and /or injury sustained during the course of gymnastics, tumbling and sport acrobatics. I hereby assume full responsibility for any and all damages, losses or injuries that I may sustain while attending or participating in classes and/or instruction. I waive all claims, demands and/or release, discharge, and covenant not to sue EAGC, its officers, employees, agents, lessors, other participants, and the place of occurrence, individually, anyone on my behalf, or otherwise and/or others, for any claim arising from any injuries that I may sustain while training and/or attending EAGC and/or any of its activities, functions, or events. I also agree to indemnify, save, and hold harmless any and all of the persons and entities heretofore named from any litigation expenses, attorney fees, loss, liability, damage, or cost which may incur as the result of such claim.

EAGC coaches and other staff members will not accept responsibility for injuries sustained by any student and/or participant during the course of gymnastics, tumbling and sports acrobatics.

Being fully aware of all risks, I consent to participate and/or to have my child (ren) participate in the programs offered by EAGC. I and my executors or other representatives, waive and release any and all right(s) and claim(s) for damages and/or injury that I or my child(ren)

I will pay any and all reasonable attorney fees as well as any and all cost(s) incurred by EAGC by defending any possible action and/or proceeding under this entire section.

I also affirm that I currently have, and will continue to provide, proper hospitalization, health and accident insurance coverage for both my child(ren)'s protection, as well as my own. I will be solely responsible for any medical cost(s) for treatment to myself and/or my child(ren).

EAGC, Emilia's & Maryland Unique All-Stars shall have the same meaning and apply to the same facility, member(s), staff under this entire agreement

SIGNATURE OF PARENT/GUARDIAN (REQUIRED) _____ DATE _____

DOCTOR'S NAME _____ PHONE _____