

Jump Start Gymnastics



Release of liability

503.475.2346

By the very nature of the activity, gymnastics carries a risk of physical injury. No matter how careful the gymnast and coach are; no matter how many spotters are used; no matter what height is used or what landing surface exists; the risk cannot be eliminated. The risk of injury includes minor injuries such as bruises, and more serious injuries such as broken bones, dislocations, and muscle pulls. Although it is very unlikely, the risk also includes catastrophic injuries such as permanent paralysis and even death from landing or falls on the back, neck or head. Basic first aid will be administered for all minor injuries. Parents, paramedics, an ambulance, or doctors may be called when necessary.

I further acknowledge, understand, appreciate and agree that my participation may result in possible exposure to and illness from infectious diseases, including, but not limited to, MRSA, Influenza, and COVID-19. While particular rules and personal discipline may reduce this risk, the risk of serious illness and death does exist. I knowingly and freely assume all such risks, both known and unknown, even if arising from the negligence of the releasees or others, and assume full responsibility for my participation and exposure.

I, despite all reasonable precautions implemented for safety, am fully aware of and appreciate the risks, as well as other damages and losses associated with participation in the programs or activities. I knowingly and willingly assume all such risks. Consequently, I hereby for myself, heirs, executors, and administrators, do waive and release any and all rights and claims for damages against Jump Start Gymnastics, Coaches, Employees or other members or representatives of JSG, whether paid or volunteer, from personal injury or accident of any sort or nature suffered by me, the undersigned, by reason of participation or membership in classes, lessons or any programs or activities of JSG.

I, the minor's parent and /or legal guardian, understand the nature of these activities and the minor's experience and capabilities and believe the minor to be qualified, in good health, and in proper physical condition to participate in such activity. I hereby release, discharge, covenant not to sue, and agree to indemnify and save and hold harmless each of the "releasees" from all liability claims, demands, losses, or damages on the minor's account caused or alleged to be caused, in whole or in part by the negligence of the "releasees" or otherwise, including negligent rescue operations. I further agree that if, despite this release, I, the minor, or anyone on the minor's behalf makes a claim against any of the releases named above, I will indemnify, save, and hold harmless each of the releases from any litigation expenses, attorney fees, loss liability, damage, or cost any may incur as the result of any such claim.

parent signature (release of liability)

date

Parents name (please print)

_____ ***Portland, 97221***

Street Address

city

zip code

phone

email address

Childs name (please print)

child's birthdate

any known medical conditions or problems

date of last physical exam

check this box if Jump Start Gymnastics does NOT have permission to publish pictures of your child