

RANDOLPH GYMNASTICS SUMMER CAMP 2019

3 MIDDLEBURY BLVD RANDOLPH, NJ 07869 P. (973) 584-4111 F. (973) 584-9967

RANDOLPH GYMNASTICS, INC. WAIVER/RELEASE OF LIABILITY

I, _____, the parent and/or guardian of _____, the enrolled participant of RANDOLPH GYMNASTICS SUMMER CAMP, understand that various activities to include, but not limited to, gymnastics, rock climbing, baseball/softball, soccer, basketball, volleyball, and swimming are daily activities of the camp and that each should be considered HAZARDOUS activities. I also recognize that there are risks inherent in each of these activities.

The enrolled participant's Parent/Guardian hereby agrees to indemnify and hold harmless Gymnastics Institute Of Randolph, Inc., its coaches, officers, directors, agents, and employees against any liability resulting from injuries that may occur to the participant during ordinary daily camp activities. The parent/guardian of the participant also agrees to indemnify Gymnastics Institute Of Randolph, Inc. for any damages incurred arising from any claims, demands, action, or cause of action by the participant.

The Parent/Guardian of the participant authorizes any representative of Institute Of Randolph Gymnastics, Inc. to have the participant treated in any medical emergency during their participation in said activities. Further, the parent/guardian agrees to pay all costs associated with medical care and transportation of the participant.

Any medical or health problems have been disclosed to Gymnastics Institute Of Randolph, Inc. (i.e. Randolph Gymnastics Summer Camp)

I HAVE CAREFULLY READ THE ABOVE LIABILITY RELEASE AND SIGN IT WITH FULL KNOWLEDGE OF ITS CONTENT AND SIGNIFICANCE.

Parent and/or Guardian Signature

Date
