

Energy Gymnastics
Family Registration Form

Personal Information

Mom Name _____ Cell Phone _____ Home Phone _____
 Dad Name _____ Cell Phone _____ Home Phone _____
 Address _____ City _____ Zip _____
 Email Address _____
 Emergency Phone _____ Emergency Contact _____
 How did you learn about Energygym? (If word of mouth, from whom?) _____

Student Information

Student Name _____ B-Day _____ Age/Grade _____
 Medical Concerns _____ M / F _____
 Student Name _____ B-Day _____ Age/Grade _____
 Medical Concerns _____ M / F _____
 Student Name _____ B-Day _____ Age/Grade _____
 Medical Concerns _____ M / F _____

ACKNOWLEDGEMENT OF RISK, PHOTO USAGE, WAIVER OF LIABILITY, MEDICAL AUTHORIZATION

Acknowledgement of Risk: I acknowledge that there are certain risks of physical injury to participants in sports or activities involving height or motion, including but not limited to dance, gymnastics, tumbling, trampoline, and giant blow-up inflatable's. I agree to assume full risk of any such injuries, damages or losses and relinquish all claims I or my child/ward may have against Energygym Gymnastics, Inc., and its officers, agents, servants and employees as a result of participating in any of the program's.

Photo Usage: I am aware that individual and group photos and videos are taken and I permit Energygym Gymnastics, Inc. to use images of my child in internal and external promotional material. This includes any printed material, broadcast and print advertising, promotional videos and the Energygym Gymnastics, Inc. website. I also permit Energygym Gymnastics, Inc. to use images of my child in broadcast and print media news coverage of Energygym Gymnastics, Inc.

Waiver of Liability: In Consideration of participation in Gymnastics/Ninja Zone, I represent that I understand the nature of this Activity and that I am qualified, in good health, and in proper physical condition to participate in such Activity. I acknowledge that if I believe conditions are unsafe, I will immediately discontinue participation in the Activity. I fully understand that this Activity involves risks of serious bodily injury, including permanent disability, paralysis and death, which may be caused by my own actions, or inactions, those of others participation in the event, the conditions in which the event takes place, or the negligence of the "releases" named below. I fully accept and assume all such risks and all responsibility for losses, cost, and damages I incur as a result of my participation in the Activity. I hereby release, discharge, and covenant not to sue Energygym Gymnastics, Inc. or Ninja Zone, its respective administrators, directors, agents, officers, volunteers, employees, other participants, sponsors, advertisers and, if applicable, owners and lessors of premises on which the Activity takes place (each considered one of the RELEASEES herein), from all liability, claims, demands, losses, or damages on my account caused in whole or in part by the negligence of the "releases" or otherwise, including negligent rescue operations and future agree that if, despite this release, waiver of liability, and assumption of risk I, or anyone on my behalf, makes a claim against any of the Releases, I will indemnify, save, and hold harmless each of the Releases from any loss, liability, damage, or cost, which any may incur as the result of such claim. Any and all Dance, Gymnastics, Tumbling, Trampoline, Giant Blow-Up Inflatables, and any Ninja skills will be conducted in a safe gym environment and will hold Energygym Gymnastics, Inc. and Ninja Zone harmless of any injuries incurred in and outside gym areas. I have read the Release and Waiver of Liability, Assumption of Risk, and Indemnity Agreement, understand that I have given up substantial rights by signing it and have signed it freely and without any inducement or assurance of any nature and intend it to be a complete and unconditional release of all liability to the greatest extent allowed by law and agree that if any portion of this agreement is held to be invalid the balance, notwithstanding, shall continue in full force and effect.

Medical Authorization: In the event of an emergency I would like the above mentioned child to be taken to a hospital for medical treatment and I hold Energygym Gymnastics, Inc. and its representatives harmless in their execution of this action.

I have carefully read and understand the Acknowledgement of Risk and Waiver of Liability and Medical Authorization and understand that my signature is required below in order for my child/ward to participate in Energygym Gymnastics, Inc. programs. I have also read the registration handbook.



Signature: _____ Date: _____

Sycamore Location: 1715 DeKalb Avenue • Sycamore, IL 60178 • (815) 899-6424 • Fax (815) 899-6429
 Genoa Location: 407 S. Sycamore Road • Genoa, IL 60135 • (815) 784-5172