

MCA GYMNASTICS

Physical Address
7820 Caswell Rd
Byron NY 14422
585-409-1882

Birthday Party Liability Release Form

Liability Release and Indemnification:

In consideration of MCA Gymnastics, LLC allowing the gymnast to participate in sports activity, class, competition, and team, including non-gymnastics activities such as dance, cheerleading, and playground activities (hereinafter referred to as the "activity"), I, and if I am not yet 18 years old my parents or legal guardians, agree to be bound as follows (the term "I" in the release refers to both the gymnast and her or his parents or legal guardians):

- Acknowledgment and Assumption of Risks.** I understand that the activity involves risk of serious bodily injury, including permanent disability, paralysis, and death, which may be caused by the gymnast's actions or inactions, those of others participating in the activity, the conditions in which the activity takes place, the negligence of the "released parties" named below, or other causes. I further understand that there may be other risks either not known to me or not readily foreseeable at this time. I fully accept and assume all such risks and all responsibility for losses, cost, and damages that may result from the activity. I hereby give my approval of and consent to the gymnast's participation in the activity. I assume all risk and hazards incidental to the activity and to transportation to and from the activity.
- Representation of Ability to Participate.** I understand the nature of the Activity, and I represent that the gymnast is qualified, in good health, and in proper physical condition to participate in the Activity. Should I ever believe that any of the above representations have become untrue, or if I should ever believe that the Activity is not safe or is no longer safe for the gymnast, then it will be my responsibility immediately to discontinue the gymnast's participation in the Activity.
- Release.** I hereby release, acquit, covenant not to sue, and forever discharge **MCA Gymnastics**, its owners, officers, administrators, employees, agents, volunteers, sponsors, advertisers, coaches and supervisors, and the owners or lessors of any facilities within which the Activity is conducted, their respective agents and employees, and all other persons providing facilities or assisting in the conduct of the Activity and in the transportation of participants to and from the Activity (collectively the "released claims").
- Indemnification.** I will defend, indemnify and hold harmless the released parties from (that is, to reimburse and be responsible for) any loss or damage, including but not limited to costs and reasonable attorney's fees (including the cost of any claim I might make or that might be made on my behalf or the gymnast's behalf that is released in this document), arising out of or connected in any way with any of the released claims.

I have read all the rules set forth by MCA Gymnastics, and agree to abide by all the rules and set forth there in to accept the judgment of the program officials in this regards.

I HAVE READ AND UNDERSTAND THIS ACKNOWLEDEMNT AND ASSUMPTION OF RISKS, REPRESENTATION OF ABILITY TO PARTICIPATE, RELEASE, INDEMNIFICATION, AND CUSTODIAL PARENT. I UNDERSTAND THAT BY SIGNING THIS DOCUMENT, I AM GIVING UP SUBSTANIAL RIGHTS. I AM EXECUTING THIS DOCUMENT VOLUNTARILY AND WITH FULL KNOWLEDGE OF ITS SIGNIFICANCE.

1. Signature of Parent / Guardian	Print Parents Name	Childs Name	Date
2. Signature of Parent / Guardian	Print Parents Name	Childs Name	Date
3. Signature of Parent / Guardian	Print Parents Name	Childs Name	Date
4. Signature of Parent / Guardian	Print Parents Name	Childs Name	Date
5. Signature of Parent / Guardian	Print Parents Name	Childs Name	Date
6. Signature of Parent / Guardian	Print Parents Name	Childs Name	Date

MCA GYMNASTICS

Physical Address
7820 Caswell Rd
Byron NY 14422
585-409-1882

Birthday Party Liability Release Form

Liability Release and Indemnification:

In consideration of MCA Gymnastics, LLC allowing the gymnast to participate in sports activity, class, competition, and team, including non-gymnastics activities such as dance, cheerleading, and playground activities (hereinafter referred to as the "activity"), I, and if I am not yet 18 years old my parents or legal guardians, agree to be bound as follows (the term "I" in the release refers to both the gymnast and her or his parents or legal guardians):

- Acknowledgment and Assumption of Risks.** I understand that the activity involves risk of serious bodily injury, including permanent disability, paralysis, and death, which may be caused by the gymnast's actions or inactions, those of others participating in the activity, the conditions in which the activity takes place, the negligence of the "released parties" named below, or other causes. I further understand that there may be other risks either not known to me or not readily foreseeable at this time. I fully accept and assume all such risks and all responsibility for losses, cost, and damages that may result from the activity. I hereby give my approval of and consent to the gymnast's participation in the activity. I assume all risk and hazards incidental to the activity and to transportation to and from the activity.
- Representation of Ability to Participate.** I understand the nature of the Activity, and I represent that the gymnast is qualified, in good health, and in proper physical condition to participate in the Activity. Should I ever believe that any of the above representations have become untrue, or if I should ever believe that the Activity is not safe or is no longer safe for the gymnast, then it will be my responsibility immediately to discontinue the gymnast's participation in the Activity.
- Release.** I hereby release, acquit, covenant not to sue, and forever discharge **MCA Gymnastics**, its owners, officers, administrators, employees, agents, volunteers, sponsors, advertisers, coaches and supervisors, and the owners or lessors of any facilities within which the Activity is conducted, their respective agents and employees, and all other persons providing facilities or assisting in the conduct of the Activity and in the transportation of participants to and from the Activity (collectively the "released claims").
- Indemnification.** I will defend, indemnify and hold harmless the released parties from (that is, to reimburse and be responsible for) any loss or damage, including but not limited to costs and reasonable attorney's fees (including the cost of any claim I might make or that might be made on my behalf or the gymnast's behalf that is released in this document), arising out of or connected in any way with any of the released claims.

I have read all the rules set forth by MCA Gymnastics, and agree to abide by all the rules and set forth there in to accept the judgment of the program officials in this regards.

I HAVE READ AND UNDERSTAND THIS ACKNOWLEDEMNT AND ASSUMPTION OF RISKS, REPRESENTATION OF ABILITY TO PARTICIPATE, RELEASE, INDEMNIFICATION, AND CUSTODIAL PARENT. I UNDERSTAND THAT BY SIGNING THIS DOCUMENT, I AM GIVING UP SUBSTANIAL RIGHTS. I AM EXECUTING THIS DOCUMENT VOLUNTARILY AND WITH FULL KNOWLEDGE OF ITS SIGNIFICANCE.

13.

Signature of Parent / Guardian	Print Parents Name	Childs Name	Date
--------------------------------	--------------------	-------------	------

14.

Signature of Parent / Guardian	Print Parents Name	Childs Name	Date
--------------------------------	--------------------	-------------	------