



WAIVER

As the legal guardian of all of my minor student(s) as well as for myself, I hereby consent to all person(s) participating in a Pioneer Gymnastics Academy Inc. program. I recognize that potentially severe injuries can occur in any activity involving height or motion, including all gymnastics activities, trampoline, birthday parties, special events and physical activity in general. I understand that it is the express intent of all staff and personnel to provide for the safety and protection of my student and myself and, in consideration for allowing my student or myself to use these facilities. I understand that risk can be reduced but never eliminated. The risk of injury includes minor injuries such as bruises and more serious injuries such as broken bones, dislocations and muscle pulls. The risk also includes catastrophic injuries such as permanent paralysis or even death from landings or falls on the back, neck or head.

I, the undersigned parent / guardian or participant acknowledge these risks and agree to hold harmless Pioneer Gymnastics Academy Inc., Edwin K Aasen III, affiliated and partner companies and organizations, property owners and lessors, staff, contractors, subcontractors, teachers, and coaches involved with Pioneer Gymnastics Academy Inc., from all liability and for any and all damages, injuries and illness including but not limited to Covid-19, suffered by my student or myself during instruction, supervision, and/or control during any and all classes.

By signing below I attest that I have read and understand this waiver.

Child Name: _____ Birth date: _____

Child Name: _____ Birth date: _____

(Printed) Parent / Guardian Name: _____

(Signed) Parent / Guardian: _____ Date: _____