

South Valley Tumbling: Waiver & Release of Liability Agreement

13692 S. Blayde Dr. * Herriman, UT 84096

Tel: 801-889-5768

DISCLAIMER: South Valley Tumbling and operator Valarie Thomas are not responsible for any injury to any person while practicing, training, taking class, participating in gym, special events, demonstrations or shows, or in any other way involved in gymnastics and tumbling for any reason whatsoever, including ordinary negligence on the part of South Valley Tumbling, its members, owner or employees.

CONSENT: I consent to my minor's participation in the activity and acknowledge that I fully understand my minor's participation may involve risk of serious injury or illness including losses which may result not only from my minor's own actions, inactions, or negligence, but also from actions, inactions, or negligence of others, the condition of the facilities, equipment, or areas where the activity is being conducted, and/or the rules of play of this type of activity. I understand that if I have any risk concerns, I shall discuss them completely with staff before I sign this agreement and before my minor's participation in the activity begins.

Knowing and understanding the risks involved with participation in the activity, I hereby voluntarily and willingly assume full and complete responsibility for all losses and damages, including injury, illness and death, resulting from my minor's participation in the activity. I agree I am financially responsible for any losses and damages resulting from my minor's participating in the activity.

WAIVER: In consideration for my minor's participation in the activity, I hereby waive all claims or causes of action, including ordinary negligence, against South Valley Tumbling, its owner, and any of their employees, teachers, or coaches arising out of my minor's participation in the activity wherever, whenever or however the same may occur.

I understand that this waiver is intended to be broad and as inclusive as permitted by the laws of the State of Utah. I have read this form and fully understand my consent and waiver.

I affirm that I am of legal age and am freely signing this agreement.

Parent/Guardian Signature: _____ Date: _____

Participant Name (first and last): _____

Participant DOB: _____ Male/Female: _____

Parent/Guardian Name (first and last): _____

Address: _____ City: _____

State: _____ ZIP: _____ Phone: _____

Email: _____