

Cary Gymnastics Center Waiver

Name: _____

Address: _____

Phone: (H) _____ (C) _____

Age: _____ Birthday: _____ Email: _____

Participant specifically assumes all risks of injury arising out of his/her presence on or about the premises, or his/her use or intended use of equipment or facilities, or his/her use participation in the activities of Cary Gymnastics Center, on or about the premises or at another location and does hereby for himself/herself, his/her heirs, executors and administrators waive, release and agree to hold free from all claims for damages, the Cary Gymnastics Center, and all its respective officers and employees.

Parent/Guardian Signature: _____ Date: _____

Please fill out completely. Each child must present a waiver in order to participate in the activities.

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