



**RELEASE OF LIABILITY, WAIVER OF CLAIMS**

**ASSUMPTION OF RISKS AND INDEMNITY AGREEMENT**

**By signing this document you will waive certain legal rights, including the right to sue.**

**AWARENESS AND ASSUMPTION OF RISK**

I am aware that gymnastics activities involve risks including risk of personal injury, death, property damage, expense and related loss, including loss of income. Included in these risks are negligence on the part of Mariposa Gymnastics Club, its directors, officers, officials and volunteers, other participants and owners of the facilities where the activities occur (referred to in the rest of this agreement as "Mariposa Gymnastics Club".) I freely accept and fully assume all such risks and the possibility of personal injury, death, property damage, expense and related loss, including loss of income.

**RELEASE OF LIABILITY, WAIVER OF CLAIMS AND INDEMNITY AGREEMENT**

In consideration of Mariposa Gymnastics Club accepting my application to participate in this activity, I agree:

To waive any and all claims that I may have in future against Mariposa Gymnastics Club.

1. To release the Mariposa Gymnastics Club from any and all liability for any personal injury, death, property damage, expense and related loss, including loss of income that I or my next of kin may suffer as a result of my participation in this activity, due to any cause whatsoever, including negligence, breach of contract or breach of any statutory duty of care.
2. To hold harmless and indemnify Mariposa Gymnastics Club from any and all liability for any damage to property of, or personal injury to, any third party, resulting from my participation in this activity.
3. That this agreement is binding on not only myself but also my next of kin, heirs, executors, administrators and assigns.

**I HAVE READ THIS AGREEMENT AND UNDERSTAND IT. I AM AWARE THAT BY SIGNING THIS DOCUMENT I AM WAIVING CERTAIN RIGHTS WHICH I OR MY NEXT OF KIN, HEIRS, EXECUTORS, ADMINISTRATORS AND ASSIGNS MAY HAVE AGAINST MARIPOSA GYMNASTICS CLUB.**

**Name of Participant(s):** \_\_\_\_\_

**Signature of Parent or Guardian if participant under the age of 18 years**

**Signed this** \_\_\_\_\_ **day of** \_\_\_\_\_, 201\_\_ . **Emergency contact#** \_\_\_\_\_

**Image Release**

Participants at any event in which Mariposa Gymnastics Club is involved may have their image, likeness and/or name, used in publications and on the internet by Mariposa Gymnastics as well as its agents and sponsors from time to time. When signing this form, gymnasts, volunteers and coaches allow the use of personal information as outlined above, and image on Mariposa Gymnastics, Gymnastics Ontario and Gymnastics Canada Media, including newsletter, website, poster, brochure, video, sponsorship packages.

**Signature:** \_\_\_\_\_  
**Date:** \_\_\_\_\_ **Phone Number:** \_\_\_\_\_