

Tumbling

# TAG's World Gymnastics

Cheerleading



Owners:

Josh & Reba Mittag

Always FUN and FITNESS

GYM: (361) 643-4207

## General Use Waiver

1<sup>st</sup> Child's:

Last Name: \_\_\_\_\_ First: \_\_\_\_\_ Sex \_\_\_\_\_ Age: \_\_\_\_\_ DOB \_\_\_\_\_

2<sup>nd</sup> Child's:

Last Name: \_\_\_\_\_ First: \_\_\_\_\_ Sex \_\_\_\_\_ Age: \_\_\_\_\_ DOB \_\_\_\_\_

3<sup>rd</sup> Child's:

Last Name: \_\_\_\_\_ First: \_\_\_\_\_ Sex \_\_\_\_\_ Age: \_\_\_\_\_ DOB \_\_\_\_\_

4<sup>th</sup> Child's:

Last Name: \_\_\_\_\_ First: \_\_\_\_\_ Sex \_\_\_\_\_ Age: \_\_\_\_\_ DOB \_\_\_\_\_

### AKNOWLEDGEMENT OF RISK AND WAIVER OF LIABILITY

As legal guardian of \_\_\_\_\_, \_\_\_\_\_ and \_\_\_\_\_ I hereby allow named student(s) to participate in the programs offered by TAGS WORLD GYM. I recognize that participation in such programs involve motion, rotation, and height in a unique environment. I further agree that participation in such activities involving gymnastics related programs can result in potentially severe injuries, including permanent paralysis or even death. I hereby forever release TAGS WORLD GYM, its officers, employees, teachers and coaches from any and all liability for damages and injuries suffered by myself or my child under the instruction of TAGS. I authorize any representative of TAGS to take the necessary steps regarding medical attention and will assume all expenses obtained during medical attention to my child for any injury or illness he/she may have.

I further acknowledge, understand, appreciate and agree that my participation may result in possible exposure to an illness from infectious diseases, including but not limited to MRSA, Influenza, and COVID-19. While particular rules and personal discipline may reduce the risk, the risk of serious illness and death does exist. I knowingly and freely assume all such risks, both known and unknown, even if arising from negligence of the releasees or others, and assume full responsibility for my participation and exposure.

I, \_\_\_\_\_, grant permission to TAG's World Gymnastics, hereinafter known as the "Media" to use my image (photographs and/or video) for use in Media publications including: Videos, Email Blasts, Newsletters, General Publications, Social Media, Website and Affiliates

SIGNATURE OF PARENT OR LEGAL GUARDIAN: \_\_\_\_\_

Parent's Name Printed \_\_\_\_\_ DATE: \_\_\_\_\_

Phone number(s) you can be at reached while your child is at this activity: \_\_\_\_\_

Email Address \_\_\_\_\_