



930 Lithia Pinecrest Road, Brandon, Florida 33511 – (813) 685-7770 fax: (813) 657-0321  
[www.goldencitygymnastics.com](http://www.goldencitygymnastics.com) - [info@goldencitygymnastics.com](mailto:info@goldencitygymnastics.com)

---

## **BLANKET WAIVER**

Due to insurance regulations, every person entering the facility must read the following waiver and sign below as an acknowledgement that he/she understands the following agreement:

I acknowledge that by participating in gym activities and/or by moving around the gym with its equipment and possible uneven surfaces, there is a risk of injury. I acknowledge that I accept the risk and waive the option to sue should I, or any minors for whom I am responsible for, incur any injury. By waiving the option to sue I also thereby release **Golden City Gymnastics, LLC** its agents or employees, officers, counselors, chaperones, coaches, helpers or assistants from liability for such injury.

## **NOTICE TO THE MINOR CHILD'S NATURAL GUARDIAN**

READ THIS FORM COMPLETELY AND CAREFULLY. YOU ARE AGREEING TO LET YOUR MINOR CHILD ENGAGE IN A POTENTIALLY DANGEROUS ACTIVITY. YOU ARE AGREEING THAT, EVEN IF **GOLDEN CITY GYMNASTICS, LLC** USES REASONABLE CARE IN PROVIDING THIS ACTIVITY, THERE IS A CHANCE YOUR CHILD MAY BE SERIOUSLY INJURED OR KILLED BY PARTICIPATING IN THIS ACTIVITY BECAUSE THERE ARE CERTAIN DANGERS INHERENT IN THE ACTIVITY WHICH CANNOT BE AVOIDED OR ELIMINATED. BY SIGNING THIS FORM YOU ARE GIVING UP YOUR CHILD'S RIGHT AND YOUR RIGHT TO RECOVER FROM **GOLDEN CITY GYMNASTICS, LLC** IN A LAWSUIT FOR ANY PERSONAL INJURY, INCLUDING DEATH, TO YOUR CHILD OR ANY PROPERTY DAMAGE THAT RESULTS FROM THE RISKS THAT ARE NATURAL PART OF THE ACTIVITY. YOU HAVE THE RIGHT TO REFUSE TO SIGN THIS FORM, AND **GOLDEN CITY GYMNASTICS, LLC** HAS THE RIGHT TO REFUSE TO LET YOUR CHILD PARTICIPATE IF YOU DO NOT SIGN THIS FORM.

---

Parent's Signature

Phone Number

Date

---

Athlete's Name (print name)

Date