



Chantilly Academy Gymnastics
14088-K Sullyfield Circle
Chantilly, VA 20151
Contact: 703-378-4966 or info@chantillyacademy.com

CHANTILLY ACADEMY GYMNASTICS & PRESCHOOL EVENT WAIVER

Event You're Attending:

Event Date:

(Please specify the birthday child's name/date of the party you're attending, or the organization you're affiliated with)

Child 1 First/Last Name:

DOB:

Medical Information or Allergies:

Child 2 First/Last Name:

DOB:

Medical Information or Allergies:

Parent's Name(s):

Mobile:

Email:

Address:

Emergency Contact & Phone:

EVENT WAIVER: **MUST BE SUBMITTED BEFORE PARTICIPATION CAN TAKE PLACE**

Waiver: I am fully aware of and accept the risks associated with participation in all gymnastics related skills, events and activities involving height, motion and/or physical contact where there is risk of injury to the student. These activities, even if done correctly, including interactions with others and those who may perform moves improperly, may result in physical injury to students or bystanders. Events & Activities may consist of tumbling, jumping, aerial stunts, stretching and the use of acrobatic equipment commonly utilized in gymnastics activities, ninja, and related events. Our facility contains uneven surfaces and multi-level mats or equipment which could cause students to fall or land improperly resulting in physical injury. I understand and agree that any physical activity may be inherently dangerous. I further understand that gymnastics/NinjaZone, and gymnastics/NinjaZone related activities always involve certain risks, including but not limited to death, serious neck and/or spinal injuries resulting in paralysis, brain damage, and serious minor injury to virtually all bones, joints, muscles, and organs.

I know of no impairment that would affect or be affected by the student's participation in any Chantilly Academy Gymnastics & Preschool activity. I agree to notify Chantilly Academy Gymnastics & Preschool in writing if I learn that the student has or incurs any impairment that prevents them from safely participating. Previous or current injuries may require a permission to participate note from a medical doctor. It is recommended that each participant receive an annual physical exam by a medical doctor and receive clearance to participate in any physical activity. I further acknowledge, understand, appreciate, and agree that participation may result in possible exposure to and illness from infectious diseases, including, but not limited to, MRSA, Influenza and COVID-19. While particular rules and personal discipline may reduce this risk, the risk of serious illness and death does exist. I hereby authorize any Chantilly Academy Gymnastics & Preschool employee to take the necessary steps regarding the administration of first aid, including the use of an AED and/or authorization to seek medical treatment for any injury or illness the participant may have. I grant permission to transport the participant to the appropriate hospital, if deemed necessary.

I, the undersigned parent(s) or guardian(s) of the student(s) herein named, in consideration of Chantilly Academy Gymnastics & Preschool, accepting the student, hereby agree to release, indemnify and save harmless its employees, agents, officers and directors against all claims, judgements or demands for damages occurring as a result of injuries sustained by the student named above during or as a result of any course given the student or during or as a result of any event or other activity, including Ninja Zone, sponsored by or participated Chantilly Academy Gymnastics & Preschool. Members are expected to carry their own accident and medical insurance. If the participant(s) I am registering are, or become UNINSURED, I understand participation is still allowed but requires additional agreement terms.

Photo Consent: I give permission to Chantilly Academy Gymnastics & Preschool and its' agents to photograph or video my child for promotional use.

In the last 3 days, my child has NOT been ill or experienced any of the below COVID-19 symptoms: Fever or chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, new loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting and/or diarrhea

I have NO new health concerns about my child that Chantilly Academy Gymnastics & Preschool should be aware of.

Parent Signature

Date