26601 Cabot Road ◦ Laguna Hills, Ca. 92653 • (949) 582-3329 ◦ www.olympicgymnastics.org

ADULT PARTICIPANT
RELEASE OF LIABILITY WAIVER

STUDENT NAME: _____
Print name

I, despite all reasonable precaution implemented for safety, am fully aware of and appreciate the risks, including the risk of catastrophic injury, paralysis, and even death as well as other damages and losses associated with participation in the programs or activities. I knowingly and willingly assume all such risks. Consequently, I hereby for myself, heirs, executors, and administrators, do waive and release any and all rights and claims for damages against the owner, operator, coaches and other members of the Olympic Gymnastics Academy (the releasees) from personal injury or accident of any sort or nature suffered by me, the undersigned, by reason of participation or membership in classes, lessons or any programs or activities of Olympic Gymnastics Academy.

Print Adult Participants Name	Adult Participant's Signature	**Date**
Print Adult Participants Name	Adult Participant's Signature	**Date**
Print Adult Participants Name	Adult Participant's Signature	**Date**
Print Adult Participants Name	Adult Participant's Signature	**Date**
Print Adult Participants Name	Adult Participant's Signature	**Date**