



# PARK CITY GYMNASTICS LTD. NYC'S GYMNASTICS & ADVENTURE PARK

170-16 39<sup>th</sup> Avenue, Flushing, N.Y. 11358  
(718) 463-1511 - Play@ParkCityGymnastics.com

## CAMP & BIRTHDAY PARTY WAIVER FORM

### Student Information (Please fill out all applicable fields)

Previous Member:  Yes  No

Last Name

First Name

Home Address

City

State

Zip

Home Phone

Birth Date

Age

Male

Female

If you wish to be contacted by email about gym closures, special events, and registration, please provide email below:

\*Email

### PARK CITY GYMNASTICS PROGRAMS

This is an exciting time for your child as she/he is going to experience all the wonders of our 5000 square foot, fully padded gymnastics and activity center. Our park is designed to promote play and learning for all ages. Your child will enjoy supervised play on our Trampolines, Inflatables, Bars, Rings and our new 16' wide Rock Climbing Wall. It's going to be a stellar experience for all.

If you would like to learn more about our programs, please submit your email address and phone number so we can reach you and set up an appointment. In order to participate, we need to make sure that you, as a parent or guardian, are aware of the activities your child will be engaging in. This is done to ensure that all participants will have a great and safe time at the Park.

Please review and sign this contract and submit it to Park City Gymnastics. Your child will not be allowed to participate in most activities without this waiver signed. If there are any questions, please feel free to call us at the gym, so we can make sure that you are comfortable with this request.

### PARK CITY GYMNASTICS CAMP & BIRTHDAY PARTY GUEST WAIVER FORM

Gymnastics & other activities available at PARK CITY GYMNASTICS LTD. carry a risk of physical injury. Despite the utmost care on our part, the risk of injury cannot be eliminated. Those injuries range from bruises to broken bones and in some circumstances, catastrophic injuries such as paralysis or death. Participation in athletics & especially gymnastics, comes with a reasonable assumption of risk.

PARK CITY GYMNASTICS LTD. is bound by law to inform all participants and/or their guardians of the risk involved in the activity of gymnastics and sports in general. Anyone participating in PARK CITY GYMNASTICS LTD. programs must sign the notice on the application, and adhere to the safety rules governing PARK CITY GYMNASTICS LTD. These rules are posted inside PARK CITY GYMNASTICS LTD. In consideration for PARK CITY GYMNASTICS LTD.'s acceptance of the applicant, and in consideration of the applicant's opportunity to improve skills through the use of PARK CITY GYMNASTICS LTD.'s staff, equipment and facilities, those legally responsible for the named participant acknowledge the risk of injury & agree to assume the responsibility of such for said participant and further agree to save and hold harmless PARK CITY GYMNASTICS LTD., its employees, and all others concerned, and to indemnify them against loss.

I certify that the enrollee has no condition that prohibits full participation in the activities at PARK CITY GYMNASTICS LTD. I assume all ordinary risks when using the facilities and hereby release PARK CITY GYMNASTICS LTD., or any of its employees, for any injury or damage suffered in connection with said use of the aforementioned facility and its equipment. In case of emergency, if I cannot be reached, I authorize PARK CITY GYMNASTICS LTD., its agents and employees, to contact and secure necessary medical attention for me or my child.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(Parent/Guardian if student is under 18 years of age)