SPECIAL EVENTS/PARTY SIGN-IN AND WAIVER

NORTHPOINTE GYMNASTICS LLC

RELEASE OF LIABILITY & INDEMNIFICATION FORM ~ ASSUMPTION OF RISK AND WAIVER OF LIABILITY:

As a legal guardian of _______, I hereby consent to the aforementioned person, me or any member of my family participating in NorthPointe Gymnastics LLC programs. I recognize that potentially severe injuries, including permanent paralysis or death can occur in any activity involving height or motion, including dance, gymnastics and related activities including tumbling and trampoline.

In consideration for allowing the aforementioned person, me or any member of my family to use these facilities, I hereby forever agree to indemnify and hold harmless NorthPointe Gymnastics LLC, it's officers, employees, teachers, coaches, and all other persons assisting in the activity, from all actual and potential claims, complaints, demands, causes of action, damages, costs, expenses, fees, and other liabilities of every sort and description, direct or indirect, fixed or contingent, known or unknown, suspected or unsuspected, and whether or not liquidated, including but not limited to, attorney fees, costs, and expenses (collectively, the "claims"), arising out of, caused by, or otherwise related in any way to injuries suffered, including but not limited to, those arising from or in any way related to actions of other participants or the negligence of any of the released parties, which may result to the aforementioned person, me or any member of my family while under the supervision, instruction, or control of or on premises owned, leased or controlled by NorthPointe Gymnastics LLC.

As legal guardian of the aforementioned person or any member of my family, I hereby agree to individually provide for the possible future medical expenses which may be incurred by my child as a result of any injury sustained while training at, or performing for NorthPointe Gymnastics LLC.

As legal guardian of the aforementioned person, or any member of my family, I hereby agree to allow NorthPointe Gymnstics LLC to use photos taken during activities in the facility for further promotion of NorthPointe Gymnastics LLC. I have read this assumption of risk and waiver of liability thoroughly and understood same completely, sign voluntarily to its content and intent, and agree that I will not institute, maintain, assist in, or otherwise encourage any suit, action, administrative proceeding, or other proceedings at law, in equity, or otherwise, against NorthPointe Gymnastics LLC on account of claims released in this agreement.

I hereby give permission to trained medical professionals to administer emergency medical treatment to my child should sickness or accident occur in my absence.

CHILD'S NAME	PARENT/GUARDIAN SIGNATURE	EIVIERGENCY PHONE NUIVIBER

I have read and understand the above: