ACKNOWLEDGEMENT & ASSUMPTION OF RISK WAIVER FORM

MUST BE FILLED OUT BY EVERY PARENT OR LEGAL GUARDIAN FOR PARTICIPANT AT KNOCKOUT CHEER & TUMBLING

Participant Name(s)		
Address:Phone Number: ()	City	Zip:
Phone Number: ()		
Name of Parent or Legal Guardian		
AddressPhone Number ()	City	Zip:
Phone Number ()	Email:	
GENERAL GYM RULES: All participan from gym or participation in activity ma		
 Bullying- including verbal or physical desired. Destruction of gym property is full. Any services or payments must be desired. Any items belonging to athlete are 	sical, will not be tolerated at any time. Il responsibility of party involved. The made before any participation in activitie not responsibility of Knockout, and is not responsibility of Knockout.	ies/classes and are non-refundable.
LIABILITY RELEASE AND WAIVER F	<u>FORM</u>	
Fully agreeing with all gym rules and regul legal guardian of	a participant (hereinafter "Participant"), activities and events to be conducted by at, further agree to release and to hold har aff and coaches employed by Knockout (ling any claim arising out of or connected ent/hazard of injury in or around storefron	hereby grant the permission necessary Knockout Cheer and Tumbling. I, in my mless Knockout Cheer and Tumbling, Cheer and Tumbling from any and all d with any illness or injury (minimal or
I further express that I acknowledge and un Participant understands that this activity in there are potential risks of which may prese parent and/or legal guardian and the Particules and regulations, and any supervisor's that training at Knockout Cheer & Tumblin injury to the musculoskeletal and/or cardio negligence from myself, the Participant, tra existent known or unknown medical condit & Tumbling, Knockout Tumbling LLC, the	volves certain risks for physical injury to ently be unknown. Because of the danger icipant recognize the importance and agress instructions regarding participation in tag is not without risk to potential injury we respiratory systems. I understand that sealiner, training partner, or other people arctions, or improper use or failure of equipments.	the Participant. We also understand that its of participating in this activity, the sees to fully comply with the policies, whis activity. I recognize and understand which can include but is not limited to rious injury or death as a result of bund myself/the Participant, as well as
I, also agree and understand that Participan etc. for Knockout Cheer & Tumbling in the appropriate for promotional purposes of the own the right to the media or any royalties	e form of digital media. This may include e company. It is understood that the Parti	e photographs or videography
I, in my own behalf and on behalf of Minor understand its contents. I, in my own behalf from liability and contains an acknowledge illness. I, in my own behalf and on behalf contract and is signed voluntarily & I verifies revices provided at Knockout Cheer & Tu	If and on behalf the Participant, are awarement of my voluntary and knowing assure of the Participant, further acknowledge they that I was given the opportunity to ask	re that this form releases the company mption of the risk of injury, death or at this signature is binding to this
Signature of Parent or Legal Guardian OR	the Participant:	
X	Date:	