



If you are currently or previously were a student at Devora's Gym in 2018-19, you do not need to resign this waiver. If not, please complete and sign below. For your convenience, you can also sign it online by visiting www.DevorasGym.com and registering as a student (You do not have to sign up for any classes or events).



Please Print

Student's First Name _____ Last Name _____
 Birthdate _____

Describe any medical conditions of the student

Mother: First Name _____ Last Name _____
 Father: First Name _____ Last

Name _____ Address _____
 City _____
 State _____ Zip _____

Primary phone number _____ Parent/guardian email address _____

As legal guardian of the registered student, I hereby consent to the aforementioned person participating in Devora's Gym programs. I am fully aware of and have a complete understanding that potentially severe or catastrophic injuries, including permanent paralysis or death may be associated with any activity involved involving height or motion including gymnastics and related activities that include tumbling, beam, bars and trampoline. I hereby release Devora's Gym, its officers, employees, teachers and coaches from all liability for any and all damages suffered by my child while under the instruction, supervision or control of Devora's Gym or while at any of its off site facilities. As the legal guardian or the aforementioned person, I hereby agree to individually provide for the possible future medical expenses that may be incurred by the aforementioned child as a result of any injury sustained while training with Devora's Gym. This acknowledgment of risk and waiver of liability, having been read thoroughly and understood completely, is signed voluntarily as to its content and intent.

Signature of parent/legal guardian _____