

**FUN & FITNESS GYMNASTICS ACTIVITY WAIVER
AUTHORIZATION AND RELEASE**

Friday Fun Night/Party/Visiting Athlete/Other

I authorize Fun and Fitness Gymnastics to consent to medical treatment for myself, my children and any other children in my care [hereinafter, the "Participant(s)"] should I be unable to provide consent, or when I cannot be reached to so consent. NO prior determination of life-threatening emergency or danger of serious or permanent injury resulting from delay of treatment need be under this authorization.

**Release and Waiver of Liability, Assumption of Risk, and Indemnity Agreement
("Agreement")**

In consideration of participating and/or attending the 2020 Level3 & 5 District Championships in the Gym, I represent that I understand the nature of this Activity and that Participant(s) and attendees are qualified, in good health, and in proper physical condition to participate in such Activity. I acknowledge that if I believe event conditions are unsafe, I will immediately discontinue Participant(s) participation in the Activity.

I fully understand that this Activity involves risks of serious bodily injury, including permanent disability, paralysis and death, which may be caused by my own actions, or inactions, those of others participating in the event, the conditions in which the event takes place, or the negligence of the "Releasees" named below; I also fully understand the risk of illness and other diseases, including COVID-19 (coronavirus), and that there may be other risks either not known to me or not readily foreseeable at this time; and I fully accept and assume all such risks and all responsibility for losses, cost, and damages I incur as a result of my, my child(ren) and/or other attendees in my care's participation in the Activity.

I hereby release, discharge, and covenant not to sue Fun & Fitness Gymnastics/Champion Gymnastics-Texas, its respective administrators, directors, agents, officers, volunteers, and employees, other participants, any sponsors, advertisers, and, if applicable, owners and lessors of premises on which the Activity takes place, (each considered one of the "Releasees" herein) from all liability, claims, demands, losses, or damages, on my account caused in whole or in part by the negligence of the "Releasees" or otherwise, including negligent rescue operations and future agree that if, despite this release, waiver of liability, and assumption of risk I, or anyone on my behalf, makes a claim against any of the Releasees, I will indemnify, save, and hold harmless each of the Releasees from any loss, liability, damage, or cost, which any may incur as the result of such claim.

I have read the RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT, understand that I have given up substantial rights by signing it and have signed it freely and without any inducement or assurance of any nature and intend it to be a complete and unconditional release of all liability to the greatest extent allowed by law and agree that if any portion of this agreement is held to be invalid the balance, notwithstanding, shall continue in full force and effect.

GOOD FAITH DISCLOSURE

My agreement warrants that I will assume responsibility for screening myself, Participant(s), child(ren) and minor attendees in my care as listed below prior to facility visit, and I understand I must be able to answer 'NO' to all of the following:

	Yes	No
Do I, Participant(s), child(ren) or attendees in my care have fever or above normal temperature?		
Have I, Participant(s), child(ren) or attendees in my care experienced shortness of breath or had trouble breathing?		
Do I, Participant(s), child(ren) or attendees in my care have a dry cough?		
Do I, Participant(s), child(ren) or attendees in my care have a runny nose?		
Have I, Participant(s), child(ren) or attendees in my care recently lost or had a reduction in sense of smell?		
Do I, Participant(s), child(ren) or attendees in my care have a sore throat?		
Have I, Participant(s), child(ren) or attendees in my care been in contact with someone who has tested positive for COVID-19?		
Have I, Participant(s), child(ren) or attendees in my care been tested for COVID-19 and are awaiting test results?		

I understand there are enhanced risks should Participant(s) be in direct contact with anyone age 65 or older for 14 days after attending or participating in Activity.

Assumption of the Risk and Waiver of Liability Relating to the Coronavirus/COVID-19

The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. COVID-19 is extremely contagious and is believed to spread from person-to-person contact. As a result, federal, state and local governments, and federal and state health agencies, recommend social distancing and have, in many locations, prohibited the congregation of groups of people. Fun & Fitness Gymnastics/Champion Gymnastics-Texas has put in place preventative measures to reduce the spread of COVID-19; however, Fun & Fitness Gymnastics/Champion Gymnastics-Texas cannot guarantee that you, Participant(s) or attendees in your care will not become infected with COVID-19. Further, attending a USAG-sanctioned event hosted by Fun & Fitness Gymnastics/Champion Gymnastics-Texas could increase your risk, Participant(s) risk, child(ren)'s risk and the risk of attendees in your care of contracting COVID-19.

By signing this Agreement, I understand this constitutes my legally binding signature, agreeing to the above Authorization and Release, Release and Waiver of Liability, Assumption of Risk, and Indemnity Agreement, compliance with the Good Faith Disclosure and Assumption of the Risk and Liability Relating to the Coronavirus/COVID-19. I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that myself, Participant(s), child(ren) or attendees in my care may be exposed to or infected by COVID-19 by attending this event and that such exposure or infections may result in personal injury, illness, permanent disability, and death. I understand that the risk of becoming exposed to or infected by COVID-19 at Fun & Fitness Gymnastics may result from the actions, omissions, or negligence of myself and others, including, but not limited to Fun & Fitness Gymnastics/Champion Gymnastics-Texas employees, volunteers, event participants, their families or others in attendance.

'PARTICIPANT NAMES' include yourself, and/or athletes, child(ren) and other minor attendees in your care.

Participant Name(s) 1) _____ 3) _____
2) _____ 4) _____

Parent/Guardian Signature _____ Date _____

Printed Name of Parent/Guardian _____ Ph# _____

Address _____ Email _____

City/State/Zip Code _____