The McKeon Center Registration & Liability Release Acro Arts Camp /Gym Camp 2024

Check all dates attending							
Full Day Gym	July 29- August						
	2						
Half Day Gym	July 29- August						
Camp	2nd						
Acro Camp	August 5-9th						

FEE SCHEDULE:

Full Day Gym Camp	\$350.00 per week			
Half Dy Gyn Camp	\$250 per week			
Acro Camp	\$300 per week			

Full payment due with registration - Amount Paid

Today's date	Student's Name						_	
Home Phone		М	F	Age	_ Birth -	date _	_	
Address				_ City		Zip		_
Mother's Full Name	Mother's Employer							
Father's Full Name	Father's Employer							
Mother's Work Phone	Father's Work Phone							
Mother's Cell Phone	Father's Cell Phone							
Emergency Contact		_Rel	ations	ship			Phone	
Health Insurance Carrier								_
E-mail address					_			

Medical Questionere:

Does your child have any allergies? If so please specify -

Does your child have any medical condition we should be aware of?

Is your child on any medication that she/he will need to take during camp?

Medical Release Form

The undersigned gives permission for the Gym I & II, Inc./ The McKeon Center owners, officers, employees, and/or agents to seek emergency medical treatment for the student in the event they are unable to reach any parent or guardian. The undersigned also agrees that they themselves will be responsible for any financial debt incurred by said actio

WAIVER/RELEASE FOR COMMUNICABLE DISEASES INCLUDING COVID-19 ASSUMPTION OF RISK / WAIVER OF LIABILITY / INDEMNIFICATION AGREEMENT

In consideration of being allowed to participate on behalf of Gym I & II Inc. / DBA McKeon Dance & Gymnastics Center gymnastics and dance program and related events and activities, the undersigned acknowledges, appreciates, and agrees that:

- 1. Participation includes possible exposure to and illness from infectious diseases including but not limited to MRSA, influenza, and COVID-19. While particular rules and personal discipline may reduce this risk, the risk of serious illness and death does exist; and,
- 2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and,
- 3. I willingly agree to comply with the stated and customary terms and conditions for participation as regards protection against infectious diseases. If, however, I observe and any unusual or significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately; and,
- 4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS (Gym I & II Inc. / DBA McKeon Dance & Gymnastics Center) their officers, officials, agents, and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and if applicable,

owners and lessors of premises used to conduct the event ("RELEASEES"), WITH RESPECT TO ANY AND ALL ILLNESS, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF RELEASEES OR OTHERWISE, to the fullest extent permitted by law.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IF FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

Name of participant: _____

Participant signature:

Date signed: FOR PARTICIPANTS OF MINORITY AGE (UNDER AGE 18 AT THE TIME OF REGISTRATION)

This is to certify that I, as parent/guardian, with legal responsibility for this participant, have read and explained the provisions in this waiver/release to my child/ward including the risks of presence and participation and his/her personal responsibilities for adhering to the rules and regulations for protection against communicable diseases. Furthermore, my child/ward understands and accepts these risks and responsibilities. I for myself, my spouse, and child/ward do consent and agree to his/her release provided above for all the Releases and myself, my spouse, and child/ward do release and agree to indemnify and hold harmless the Releases for any and all liabilities incident to my minor child's/ward's presence or participation in these activities as provided above, EVEN IF ARISING FROM THEIR NEGLIGENCE, to the fullest extent provided by law.

Name of parent/guardian: _____

Parent/Guardian Signature _____ Date _____