

Tobler Gymnastics
440 Pierce Street
Anoka, MN 55303
www.toblergymnastics.com

Waiver/Release Form

Student's First and Last Name: _____

We, the staff at Tobler Gymnastics, recognize our obligation to make our student and parents aware of the risks and hazards associated with the sport of gymnastics, trampoline, tumbling and dance. Students may suffer injuries, possibly minor, serious or catastrophic in nature. Gymnastics, trampoline, tumbling and dance can be dangerous and can lead to injury.

As parents/guardians, I agree and promise to hold harmless and indemnify Tobler Gymnastics or its staff in connection with any claims for personal liability, property damage, etc.

As parents/guardians, I fully understand that Tobler Gymnastics staff members are not physicians or medical practitioners of any kind. With the above in mind, I hereby release the Tobler Gymnastics staff to render first aid to my child or children in the event of any injury or medical help, including transportation by a Tobler Gymnastics staff member or its representatives, whether paid or volunteer, to any health care facility or hospital, or calling of an ambulance for the child should the Tobler Gymnastics staff deem this to be necessary.

In case of an emergency, please contact:

Name: _____ Phone Number: _____

Parent/Guardian: _____

(Printed Name)

Parent/Guardian: _____

(Signature)