

Wilson School of Gymnastics and Dance **ADULT** Consent-Exculpatory Agreement
This Agreement is Valid From Date Signed to August 31, 2012

Today's Date _____ **Your Name** _____

Street _____ City _____

ST _____ ZIP _____ Your Telephone Number _____

Emergency Contact _____ Telephone Number _____

As an adult of legal age I acknowledge that I willfully choose to participate/observe in the activity checked below which is sponsored by the Wilson School of Gymnastics and Dance. As with any physical activity there is an inherent risk of injury, possibly catastrophic and assume full responsibility for injuries from existing conditions/weakness. I, intending to be legally bound, do hereby, for myself, my heirs, executors and administrators, waive and release any and all right and claims for damages which may hereafter accrue to me against the Wilson School of Gymnastics and Dance, it's directors, officers, employees, agents, representatives, successors and/or assigns, for any and all damages which may be suffered by me in connection with my participation in the Wilson School of Gymnastics and Dance or which may arise out of traveling to, or participating in, and returning from any activity within the program. The School's representatives, in an emergency, have my permission and consent, in the event that I am unable to give consent at the time, to utilize at my expense, the most convenient emergency medical service or ambulance to transport me to the nearest hospital.

CIRCLE ONE: Birthday Party Toddler Class Field Trip Adult Classes Other _____

PLEASE CIRCLE existing medical problems: Epilepsy Allergies Diabetes Asthma, Heart Disease, Scoliosis. Other, please explain: _____

If this is a class for yourself, how did you find out about our program?

Please Circle: Friends Yellow Pages Internet Search Website Road Sign Coupon Book Other

WSGD uses pictures on their website of children during Classes, PlayTime, Birthday Parties etc. your signature on this form acknowledges this. **No personal information is ever given on our website.**

SIGNATURE _____ DATE: _____