PANTHERS GYMNASTICS
"THIRD PARTY" REGISTRATION FORM

Special use of the gym: **Third party Gym Rental**
Organization name: _____

Coaches: _____

Participant Information

Gymnast Name _____ (First / Last) **Birth Date** M _____ D _____ Y _____ F ☐ M ☐

Address _____ (Street) **Email** _____

_____ (City) **Postal Code** _____

Phone No. **Home** _____ **Work** _____ **Cell** _____

Father's Name _____ **Mother's Name** _____

Emergency Contact: Name_____ **Phone:**_____

MB. Medical Registration No. _____ (6 digits) **Personal Health #** _____ (9 digits)

Medical conditions we should be aware of: _____

***Only registered participants may enter the gymnasium. Reg. fee: $15.00, Payable to PANTHERS.**
***Participants must be supervised by coach(es) at all times.**
***Panthers Gymnastics Club reserves the right to revoke membership and restrict access to any individual which the club does not want any association with.**
***Panthers Gymnastics Club reserves the right to cancel or stop at any time any activities in its premises that it deems not, or no longer, in its best interest.**

Participant's Waiver

In consideration of your acceptance of my participation and acknowledging that any participation to any physical activities has inherent risks that I am willing to accept, I , _____ intending to be legally bound, do hereby, for myself, my heirs, executors, and administrators, waive and release and forever discharge any and all rights and claims for losses, damages and /or injuries which I may or may hereafter accrue to me against the Panthers Gymnastics Club and or their respective officers, staffs, agents, representatives and / or assigns for any and all losses, damages and injuries which may be sustained and suffered by me in connection with my association with or entry in training at the Panthers Gymnastics Club, any activities associated with, or which may arise out of my traveling to , participating in and returning from, said Club.

I will abide by all rules stated and/ or posted by the Panthers Gymnastics Club, and use the gym and its equipment within its intended use. I will be liable for any damage outside the normal use of the gym and its equipment.

Name of Participant: _____ Panthers Rep.: _____

Signature of Participant:_____ Panthers Rep Signature: _____

Name of Parent : _____ Signature of Parent:_____
(if under 18 Years old)
Coach(es) Name(s): _____ _____

Coach(es) Signature(s): _____ _____

Date: _____ , Winnipeg, Manitoba