

Gymnastics BC Independent Member Registration

Registration Year: September 1, 2010 - August 31, 2011

This form must be completed in full to be properly registered.

Date: _____ Previous Member New Member

First Name: _____ Last Name: _____

Address: _____

City: _____ Postal Code: _____ Phone: _____

Email Address: _____

Birthdate (D/M/Y): _____ Male Female

Independent Coach (not affiliated with a club)

NCCP # _____ Classification: Recreational Fee \$25 Competitive Fee \$25

Discipline(s): MAG WAG DMT Trampoline Tumbling Aerobic

Judge (not involved with a club as coach, athlete, etc.)

Level: _____ Classification: Judge Fee \$25

Discipline(s): MAG WAG DMT Trampoline Tumbling Aerobic

Volunteer (not affiliated with a club)

Volunteer Position: _____ Classification: Volunteer Fee \$11

**PLEASE READ THE APPLICABLE INFORMED CONSENT FORM CAREFULLY
adult or parent/guardian signature is REQUIRED**

PARTICIPANT'S INFORMED CONSENT FORM (18 & Over)

Risk: I, the undersigned understand and acknowledge that participation in the Gymnastics BC sanctioned event may result in personal injury and property damage or loss. I fully understand these risks and hereby agree to participate in the Gymnastics BC sanctioned event voluntarily and at my own risk.

Rules: I understand that the rules and regulations are designed for the safety and protection of participants and hereby agree to abide by the rules and regulations set down by the Gymnastics BC and the organizing club (if applicable).

Media Release: I hereby grant to Gymnastics BC the right to use, without payment of any fee or charge, any written information (excluding information contained on the Medical Form), photograph, video tape or other visual media of myself taken during the Gymnastics BC sanctioned event for the purpose of furthering Gymnastics BC objectives.

Liability: I agree to HOLD HARMLESS AND INDEMNIFY Gymnastics Canada Gymnastique, Gymnastics BC, the Organizers and/or its agents from any and all actions, claims, demands, losses, judgments or costs of any nature to any third party resulting from my association with the Gymnastics BC sanctioned event and I agree not to make any claims or take any proceedings against any person, society, corporation or other legal entity who might claim contribution or indemnity from Gymnastics Canada Gymnastique, Gymnastics BC, the Organizers and/or its agents in respect of matters which are subject of this Release. I agree that this Release shall bind my heirs, executors, administrators and assigns.

PARTICIPANT'S INFORMED CONSENT FORM (Under 18)

Risk: I, the undersigned give my consent for my child to participate in the Gymnastics BC sanctioned event. I understand and acknowledge that participation in the Gymnastics BC sanctioned event may result in personal injury and property damage or loss. I fully understand these risks and hereby give my son/daughter permission to participate in the Gymnastics BC sanctioned event.

Rules: I understand that the rules and regulations are designed for the safety and protection of participants and hereby agree to assume full responsibility to instruct my son/daughter of the risks involved and inform him/her of the importance of abiding by the rules and regulations set down by the Gymnastics BC and the organizing club (if applicable).

Media Release: I hereby grant to Gymnastics BC the right to use, without payment of any fee or charge, any written information (excluding information contained on the Medical Form), photograph, video tape or other visual media of my son/daughter taken during the Gymnastics BC sanctioned event for the purpose of furthering Gymnastics BC objectives.

I, as the parent/guardian of the participant named herein, hereby declare that I have read, understood and agree to the contents of this Informed Consent in its entirety.

I have read the minor/adult waiver as above and agree with the terms.

Signature: _____ Date: _____