

2016-2017 DROP IN REGISTRATION INSURANCE FORM

PLEASE PRINT CLEARLY

Parent/Guardian

First Name: _____ Last Name: _____

Relationship to child: Mother Father Other Guardian (specify): _____

Phone: _____ Email: _____

Address: _____

City: _____ Postal Code: _____

Participant #1

First Name: _____ Last Name: _____

Birthdate: _____ Gender: Female Male
(dd / mm / yyyy)

Allergies/Medical Concerns: _____

Participant #2

First Name: _____ Last Name: _____

Birthdate: _____ Gender: Female Male
(dd / mm / yyyy)

Allergies/Medical Concerns: _____

Participant #3

First Name: _____ Last Name: _____

Birthdate: _____ Gender: Female Male
(dd / mm / yyyy)

Allergies/Medical Concerns: _____

Participant #4

First Name: _____ Last Name: _____

Birthdate: _____ Gender: Female Male
(dd / mm / yyyy)

Allergies/Medical Concerns: _____

WAIVER

LGF GYM RULES

I agree to respect Langley Gymnastics Coaches and Staff, and I agree to abide by all drop in and gym/facility rules.

RELEASE POLICY

I, hereby make application for membership in the Langley Gymnastics Foundation for my son/daughter and so hereby agree, upon the acceptance of this application by the Executive of the said club, to obey the Constitution, Rules and regulations of the Langley Gymnastics Foundation of which, upon acceptance of this application and payment in full of the fee, he/she shall become a fully registered member of the said Club, Association, Federation. In consideration of you accepting this application, I hereby, for my son/daughter and my/their heirs, executors and administrators, waive and release any rights and claims for bodily harm and damage I/They may have against the Langley Gymnastics Foundation, the Gymnastics BC and Gymnastics Canada Gymnastique, or organizations sponsoring meets, or its agents, representatives, successors, and assignees, for any injuries which may be suffered by my son/daughter during regular instruction periods, special instruction periods, demonstrations or competitions whilst representing the Langley Gymnastics Foundation.

ASSUMPTION AND ACKNOWLEDGMENT OF RISKS FOR MINORS

RE: Use of Premises and Equipment of LANGLEY GYMNASTICS FOUNDATION ASSOCIATION.

TO: the above club, operating as LANGLEY GYMNASTICS FOUNDATION ASSOCIATION (referred to in this document as LGF) and its directors, officers, employees, representatives, officials, landlord and agents (collectively referred to in this document as the Agents)

I have read the guidelines and rules issued for the use of LGF's premises and equipment, which I understand, and I agree to be bound by them. I further agree to acknowledge that:

1. The rules and guidelines governing the use of the premises and equipment are solely for that purpose, that is, for the use of gymnastics activities, and it remains my sole responsibility to act and govern myself in such a manner as to be responsible for my own safety;
2. I am aware of the risks inherent in participating in gymnastics activities and the use of gymnastics premises, facilities and equipment and I assume the risks and waive notice of all conditions, dangers or otherwise relating to or arising out of such use.

Consent for Use of Likeness and Information for Minors and Adults

I grant to Gymnastics BC and Langley Gymnastics Foundation, the right to use, without payment of any fee or charge, any photograph, video tape or other visual media of myself for the purpose of furthering Gymnastics BC objectives including but not limited to use for media, inclusion in Gymnastics BC and/or the Langley Gymnastics Foundation's publications, website(s), and advertising. I further agree that information gathered on formal Gymnastics BC biography forms may be used for the purpose of furthering Gymnastics BC objectives including but not limited to use for media, inclusion in Gymnastics BC publications, website and advertising.

The collection, use, disclosure and security of your personal information are all regulated by law in British Columbia. Gymnastics BC (GBC) collects and uses your personal information to provide you with the programs, services, products and information you require as a member of GBC. To enable GBC to manage and develop its operations from local to international levels, GBC may share your personal information with its members and Gymnastics Canada Gymnastique, and also with selected third parties who are acting on our behalf as our agents, suppliers or service providers. From time to time, GBC may contact you directly or on behalf of corporate sponsors whose products, services or information may be of interest to you. If you do not want your family to be included on the GBC mailing list, please check the box at the bottom of this form.

I do NOT consent for Use Likeness and Information

A copy of our Privacy Policy is available at www.gymnastics.bc.ca or by contacting the GBC Privacy Officer at Gymnastics BC, #230 3820 Cess-na Drive, Richmond, BC, V7B 0A2, [604-333-3495](tel:604-333-3495) or info@gymnastics.bc.ca. Submission of this registration form to GBC constitutes your consent to collect, use, disclose and retain your personal information as is reasonable for GBC's stated purposes.

Signature: _____ **Date:** _____