

Gold Medal Excellence All-Sports Training & Conditioning Enrollment/Waiver

A waiver is needed for each individual. Please fill this out legibly in case we need your contact information

Insurance Waiver

Parent/Guardian Information

Child's last name _____ First name: _____
Age: _____ Date of Birth: _____
Health conditions: _____
E-mail address: _____
Parent or Guardian Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Home phone: _____ Work phone: _____
Emergency contact: _____ Emergency phone number: _____
Insurance Provider _____
Policy or Subscriber number _____

I have enrolled my child in a program of physical activity. I hereby affirm that he/she is in good physical condition and does not suffer from any disability that prevents or limits his/her participation in this exercise program. In consideration of my child's participation in Gold Medal Excellence All-Sports Training and Conditioning program, I hereby release Gold Medal Excellence All-Sports Training and Conditioning (employees and owners), from any claims, demands and causes of action arising from his/her participation with Gold Medal Excellence All-Sports Training and Conditioning.

I realize there are physical risks when participating in a program of physical activity. I hereby release Gold Medal Excellence All-Sports Training and Conditioning from any liability now or in the future including, but not limited to, pulls or tears, broken bones, shin splints, heat prostration, knee/lower back/foot injuries and any other illness, soreness or injury however caused, occurring during or after my child's participation in a Gold Medal Excellence All-Sports Training and Conditioning , individual session, group session, team session, camp or clinic.

I have read, understand and accept all policies.

Parent's signature: _____

Date _____

Referred By: _____

Return to Christopher Asher, Moriah Jubrey, Michelle Vaughner or at training session or
mail to 1730 Camino Palmero #404, LA, CA 90046