

**Participant Release Form**  
**HAWAIIAN HULA FUN MEET 2020**  
**May 2nd & 3rd, 2020**



**Event Location:** Dynamyx Gymnastics Club -25 Chisholm Avenue, Bay 104, St. Albert AB

Participant's Name: \_\_\_\_\_

Participant's Health Insurance Number (optional): \_\_\_\_\_

Participant's Club: \_\_\_\_\_

**Participant Release:**

In consideration of the Dynamyx Gymnastics Club of St. Albert providing service, supplies, and facilities for the above event, I do hereby, for myself, my child or ward, our heirs, executors and administrators, release and forever discharge Dynamyx Gymnastics Club of St. Albert and all of its servants, agents, officers, employees and all persons assisting it and/or them for any or all liability for injury, loss, sickness, death or any other damage resulting from the negligence of the above mentioned persons or in any cause whatsoever attribute in any way to the conduct of said persons or in any arising out of my participation in such event or which may arise out of my travelling to, and attend, or returning from such an event.

I hereby covenant and agree to save harmless the Dynamyx Gymnastics Club of St. Albert and its servants, agents, officers, employees and persons assisting them from all claims and demands whatsoever which may be made in respect of such injury, loss, sickness or any other damage which may happen to me, my child or my ward.

Signed This \_\_\_\_\_ Day of \_\_\_\_\_, \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_

Witness: \_\_\_\_\_

**PIPA:**

Dynamyx Gymnastics Club of St. Albert may be contacted by the media for participant quotes, interviews or pictures. These sounds and images (video and still) may be published or aired in a variety of locations, including audio tapings on television, radio and newspaper, as well as Dynamyx website and publications. Your permission is required for the above to take place.

Signed This \_\_\_\_\_ Day of \_\_\_\_\_, \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_