



PA Aerials Invitational 2023

Athlete Waiver

PLEASE PRINT CLEARLY

Name of Athlete: _____

Date of Birth (d/m/y): _____

Home phone: _____ Cell Phone: _____

Emergency Contact during event: _____ Phone: _____

In consideration of your acceptance of my entry 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 damage which I may have or may hereafter accrue to me against the Gymnastics Saskatchewan Association, the organisers or their respective officers, agents, representatives and/or assigns for any and all damages which may be sustained and suffered by me in connection with my association with or entry in the above athletic meet or which may arise out of my travelling to or participating in and returning from said athletic meet.

Submission of your registration to the P.A. Aerials Candy Cane Classic constitutes your consent to collect, use, disclose and retain your personal information as is reasonable for Gymnastics Saskatchewan and the P.A. Gymnastics Club for the following purposes: Name, address, photos, event results, phone number, and e-mail address for the purpose of communicating about programs, events and activities.

Athlete's Signature (If 18 years of age or over) _____

Parent/Guardian Signature _____

Date _____