



Refer A Friend Incentive Program

Welcome to Jump Ahead Academy! We offer classes in gymnastics, introduction to sports, circuit weight training and Pilates matwork. Your friend _____ has invited you to try your first class FREE with us. Simply view our current schedule online at www.JumpAheadAcademy.com and call us 24 hours in advance to reserve your spot in a class. If you register for a session at the end of your trial we'll waive the \$20 lifetime membership fee. Please have one of your parents completely fill out this form and bring it to your class.

Jump Ahead Academy, LLC Minor Child Participation Waiver

This RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT is required by our insurance provider and must be agreed to prior to participation.

In consideration of participating in the full scope of activities offered at Jump Ahead Academy, LLC I represent that I understand the nature of these activities and that I am qualified, in good health, and in proper physical condition to participate in such activities. I acknowledge that if I believe event conditions are unsafe, I will immediately discontinue participation in the activities. I fully understand that these activities involve risks of serious bodily injury, including permanent disability, paralysis and death, which may be caused by my own actions, or inactions, those of others participating in the activities, the conditions in which the activities take place, or the negligence of the "releasees" named below; and that there may be other risks either not known to me or not readily foreseeable at this time; and I fully accept and assume all such risks and responsibilities for losses, cost, and damages I incur as a result of my participation in these activities.

I hereby release, discharge, and covenant not to sue Jump Ahead Academy, LLC, its respective members, managers, independent contractors, administrators, directors, agents, officers, volunteers, and employees, other participants, any sponsors, advertisers, and, if applicable, owners and lessors of premises on which the activities takes place, (each considered one of the "Releasees" herein) from all liability, claims, demands, losses, or damages, on my account caused or alleged to be caused in whole or in part by the negligence of the "releasees" or otherwise, including negligent rescue operations and further agree that if despite this release, waiver of liability, and assumption of risk I, or anyone on my behalf, makes a claim against any of the Releasees, I will indemnify, save, and hold harmless each of the Releasees from any loss, liability, damage, or cost, any of which may incur as the result of such claim.

I have read the RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT, and understand that I have given up substantial rights by signing it and have signed it freely and without and inducement or assurance of any nature and intend it to be a complete and unconditional release of all liability to the greatest extent allowed by law and agree that if any portion of this agreement is held to be invalid the balance, notwithstanding, shall continue in full force and effect.

Printed name of participant

(____-____-____) Date: _____
Date of Birth

PARENTAL CONSENT

AND I, the minor's parent and/or legal guardian, understand the nature of the above referenced activities and the Minor's experience and capabilities and believe the minor to be qualified to participate in such activities. I hereby Release, discharge, covenant not to sue and AGREE TO INDEMNIFY AND SAFE AND HOLD HARMLESS each of the Releasees from all liability, claims, demands, losses or damages on the minor's account caused or alleged to have been caused in whole or in part by the negligence of the Releasees or otherwise, including negligent rescue operations, and further agree that if, despite this release, I, the minor, or anyone on the minor's behalf makes a claim against any of the above Releasees, I WILL INDEMNIFY, SAVE AND HOLD HARMLESS each of the Releasees from any litigation, expenses, attorney fees, loss liability, damage, or cost any Releasee may incur as a result of any such claim.

Printed name of parent/or legal guardian

Date: _____

Signed name of parent/or legal guardian

Home Address: _____
Street City State Zip

Home Phone: () _____ - _____ Emergency #: () _____ - _____

Email Address: _____