

2020-2021 Registration & Waiver Form



Parent / Guardian Name 1 Cell or Home Phone Parent / Guardian Name 2 Cell or Home Phone

Primary Address City ST Zip

Primary E-mail Address

Emergency Contact Name Relationship

Child 1: _____ Gender: ____ DOB: _____ Child 2: _____ Gender: ____ DOB: _____

Child 3: _____ Gender: ____ DOB: _____ Child 4: _____ Gender: ____ DOB: _____

Please list any food allergies, medical, physical or psychological needs:

I, _____, as parent or legal guardian of _____, a minor (hereinafter "Minor"), **acknowledge my/child(ren) has/have no physical or health conditions that would limit participation in athletic activities or present a known and undue risk of transmitting any virus and/or disease to other participants in the above activities. I hereby give permission for my child(ren) to have a temperature taken before participation in activities at Perpetual Motion Children's Sports Center, Inc., a Minnesota corporation (hereinafter "Perpetual Motion"), to participate in activities at Perpetual Motion and to work on any necessary equipment. I understand that Perpetual Motion will keep confidential information regarding participants' temperatures and reserves the right to exclude individuals from participation in activities based on this information in accordance with Perpetual Motion policies.**

I acknowledge and agree, on my own behalf and on behalf of Minor, that such participation subjects Minor to the possibility of physical illness including the possible transmission of virus and/or disease or injury (minor, serious, catastrophic and/or death), and I, on my own behalf and on behalf of Minor acknowledge that Minor is assuming the risk of such illness or injury by participating in the activity. In the event of such illness or injury, I authorize Perpetual Motion to obtain necessary medical treatment for Minor and hereby, on my own behalf and on the behalf of Minor, release and hold harmless Perpetual Motion, its directors, officers, employees and agents, in the exercise of this authority. I further acknowledge and understand that I will be responsible for any and all medical and related bills that may be incurred on behalf of Minor by Perpetual Motion for illness or injury Minor may sustain participating in the activity.

For good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, I, on my own behalf and on behalf of Minor, further agree to release and hold harmless Perpetual Motion, its directors, officers, employees and agents, from any and all liability for negligence or other claim, judgment, loss, liability, cost, and expense (including, without limitation, attorney's fees) arising out of Minor's participation in the activity. I further agree to indemnify and hold harmless Perpetual Motion, its directors, officers, employees and agents, from any and all loss, damage, liability, cost, or expense that Perpetual Motion may incur or suffer as a result of any claim of any kind whatsoever arising out of Minor's participation in the activity.

I hereby represent and warrant that any medication to which Minor is allergic or is currently taking is listed above.

I, on my own behalf and on behalf of Minor, hereby represent and warrant that I have read this Registration and Waiver Form in its entirety and fully understand its content. I, on my own behalf and on behalf of Minor, have signed this Registration voluntarily and of my own free will.

Signature of Parent/Legal Guardian: _____ Date: _____

Cancellations and Refunds - All cancellations need to be in writing. Any cancellation before the session start date will receive a full tuition refund. Cancellations after the session start date will be charged a \$30 cancellation fee per student. If Perpetual Motion cancels a class due to low enrollment, you will receive a full refund. Signature of Parent/Legal Guardian: _____ Date: _____

Photo Release Waiver (optional) - By signing this you agree to release the rights to photos taken of your child, therefore agreeing to the use of the photos on Perpetual Motion's website or social media. Signature of Parent/Legal Guardian: _____ Date: _____