

GO:VER GYM TRAIN WITH YOUR KID

FOR AGES: 10-15

TO BE COMPLETED BY THE PARENT/GUARDIAN	
CHILD DETAILS:	
FIRST NAME	SURNAME
AGE	DOB
PARENT/GUARDIAN DETAILS	
FIRST NAME	SURNAME
RELATIONSHIP	
ADDRESS	
	POSTCODE
TEL: HOME	TEL: MOBILE
EMAIL	
<p>By providing your contact details you are agreeing to receiving communication from us that is essential for the smooth running of the services you are partaking in.</p> <p>If you also wish to be added to our mailing list to receive Go:ver Gym news and events, please tick here. <input type="checkbox"/></p>	
<p>Whilst using the facilities at Go:ver Gym, we request the parent/guardian is 100% responsible for the safety and wellbeing of their child at all times. This includes ensuring the child is under your constant supervision, preventing unnecessary risk of injury especially with regards to equipment and other members using the facilities at the same time.</p> <p>GYM ETIQUETTE IMPORTANT PLEASE READ WITH YOUR CHILD</p> <p>When finished with a workout, please ensure you've put all your equipment away in the correct places - be respectful to our staff and other members.</p> <p>Ensure all equipment you've touched is spray disinfected after use – this includes if you sweat or spill chalk etc – good hygiene is imperative.</p> <p>No muddy shoes in the centre AT ALL – this includes the changing rooms and especially in the gym. Please bring gym shoes with you and change into them outside if your shoes are muddied. Any culprits will be asked to hoover and mop their own debris.</p> <p>Barbell use - Barbell exercises are not permitted for your age group.</p> <p>Respect other members – we are proud to have a varied demographic of members at Go:ver Gym so please show respect - be friendly and respect personal space and retain a friendly, inclusive, training environment.</p>	
I ACKNOWLEDGE I HAVE READ YOUR GYM ETIQUETTE (PLEASE TICK) <input type="checkbox"/>	
I CONFIRM MY CHILD IS AT LEAST 10 YEARS OLD (PLEASE TICK) <input type="checkbox"/>	
MEDICAL PROBLEMS/ALLERGIES/INHALER (PLEASE LIST)	
I give consent for appropriate trained staff at Go:ver Gym to give first aid on the above named child if needed <input type="checkbox"/>	

SOCIAL MEDIA	
Periodically we take gym action shots to promote Gover Training Ltd and post these on our social media pages. Please tick here if you DO NOT wish your child to be included on social media	<input type="checkbox"/>
BARBELLS	
PLEASE NOTE: Barbell exercises are not permitted for this age group.	

Train with your Kid Waiver of Liability

I give my full consent for the mentioned child to participate in the 'Train with your Kid' as organized by Go:ver Training Ltd and held at Go:ver Gym. I am aware that although all steps are taken to ensure participants safety, as with all physical activity there are inherent risks which can include accidents, falls, injury or even death.

I confirm that I know of no medical, physical or mental reasons why the mentioned child would not be capable of performing the physical activity in which they wish to participate at Go:ver Gym. I acknowledge my responsibility in communicating to a staff member prior to commencing activity, any physical and/or mental concerns affecting the mentioned child which could conflict with use of the facilities at Go:ver Gym.

I assume all risks of injuries associated with use of Go:ver Gym and its facilities including, but not limited to falls, contact with other participants, exercises and techniques taught to me by trainers employed by or providing services for Go:ver Training Ltd. and all other risks being known and appreciated by me.

Having read this waiver and knowing these facts, in consideration of accepting the mentioned child's use of the gym facilities and of services provided to the mentioned child at Go:ver Gym by Go:ver Training Ltd. I agree to **Hold Harmless, Waive and Release** Go:ver Gym, its directors, employees, representatives, anyone else providing a service at Go:ver Gym and successors from any responsibility, liabilities, demands or claims of any kind arising out of the mentioned child's use of facilities at Go:ver Gym or out of their participation in training, classes or anything else organised by or on behalf of Go:ver Gym.

AGREEMENT	
I hereby acknowledge that I am the legal guardian of the pre-mentioned child and all the information I have given is accurate. I confirm by my signature that I have read and understand the 'Train with your Kid' Waiver of Liability. I am aware that this is a waiver and a release of liability, and I voluntarily agree to its terms.	
PARENT/GUARDIAN FULL NAME	
PARENT/GUARDIAN SIGNATURE	
DATE	
STAFF NAME UPLOAD DOCUMENT TO CM	DATE