



Parental Consent and Release

Please print all information clearly

Minor's Full Name _____ DOB _____

Minor's Full Name _____ DOB _____

Minor's Full Name _____ DOB _____

Full Address:

Emergency Contact Information:

Parent's Full Name Printed: _____ Membership # _____

Full Address (if different):

Phone Number: _____ Cell: _____

Email: _____

1. I understand the risks inherent in activities such as those occurring at, in association with, under the direction of, and/or having any participation by Great Bay Athletic Club (GBAC).
2. I hereby agree to release and hold harmless GBAC, for any and all detriments, including but not limited to physical injury, emotional distress, loss of earnings and/or earning potential or any other loss that might be sustained by minor child or children or those over whom I have legal guardian status, without regard to whether such detriment to said minor was caused by the negligence of any agent, associate or employee of GBAC.
3. I understand that it is my duty to inspect GBAC on behalf of all persons over whom I have legal guardianship, including but not limited to all facilities, premises, equipment, personnel, and/or expertise, until such child is eighteen or until I no longer have legal guardian status over said child or children, in order to determine by a standard of responsibility whether such facilities, equipment, premises, personnel and expertise are safe, before allowing said minor to participate in any activity whatsoever which is conducted in association with, under the direction of, and/or which consists of any participation by GBAC.
4. By signing this document, I understand that this release and consent form shall be placed on file at GBAC, and shall be considered to be in operation according to its terms listed herein for as long as said minor is under the age of eighteen, without need for renewal. BY SIGNING THIS DOCUMENT, I CERTIFY THAT I HAVE READ AND UNDERSTAND ALL OF THE CONTENTS HEREIN.

Signed _____

Parent/Guardian

Date _____