



88 Wells Avenue Newton, MA  
(617) 244-3300 / (617) 244-5777 (Fax)

[www.exxxcel.net](http://www.exxxcel.net)

**2025-26 EXXCEL GYMNASTICS AND CLIMBING  
VACATION CAMP PARTICIPANT WAIVER**

Child #1 Name \_\_\_\_\_ F \_ M \_ DOB \_\_\_\_\_ E-mail \_\_\_\_\_

**Any medical conditions to which we should be alerted:** \_\_\_\_\_

Child #2 Name \_\_\_\_\_ F \_ M \_ DOB \_\_\_\_\_ E-mail \_\_\_\_\_

**Any medical conditions to which we should be alerted:** \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Parent's Name \_\_\_\_\_ Cell Phone # \_\_\_\_\_

Home Phone # \_\_\_\_\_ Work Phone # \_\_\_\_\_

Parent's Name \_\_\_\_\_ Cell Phone # \_\_\_\_\_

Home Phone # \_\_\_\_\_ Work Phone # \_\_\_\_\_

Emergency Contact Name \_\_\_\_\_ Emergency Phone # \_\_\_\_\_

**Authorized people to pick up:** \_\_\_\_\_

**Acknowledgment of Risk and Waiver of Liability**

As the parents or legal guardians of \_\_\_\_\_, we hereby give permission for our child to participate in programs at Exxxcel Gymnastics, LLC. We recognize that gymnastics and climbing are sports that involve height and rotation of the body, and there are inherent risks involved. On behalf of our child and on our own behalf, we agree to waive all claims against Exxxcel Gymnastics, LLC and it's owners, staff and instructors for any liability, loss, cost, damage, medical expense, long-term care or emotional distress arising out of any personal injury, including total disability, paralysis and death, which may occur to any of our children while on the premises of or under the instruction, supervision, or control of Exxxcel Gymnastics, LLC. We hereby testify to our child's sound health of mind and body and we authorize Exxxcel Gymnastics, LLC to seek medical treatment at the nearest medical facility in case of emergency.

- Exxxcel reserves the right to make, display and/or publish individual photographs. Photographs may be displayed within the gym, on the Internet, or printed in our advertisements or promotional materials.
- Exxxcel is not responsible for lost or stolen items brought into the facility. Please leave all valuable items at home.
- There is a \$25.00 late fee charged if a child is picked up after the scheduled pick up time from camp.
- **No refunds or credits will be given for missed or cancelled camp days.**

We have read and understand all the above and agree to the above terms, including the Waiver of Liability.

Parent, Guardian or Authorized Person's Signature: \_\_\_\_\_ Date: \_\_\_\_\_