



**Sapphires Rhythmic Gymnastics Club  
Waiver & Agreement**

I, the parent/guardian of \_\_\_\_\_ know that participation in any sport is a potentially hazardous activity. I realize that he/she should not participate unless he/she is medically able and properly trained. I assume all risks associated with his/her participation. Having read this waiver and knowing these facts and in consideration of your accepting my child's application to participate, I waive and release the Sapphires Rhythmic Gymnastics Club, Rhythmic Gymnastics Manitoba (RGM), all sponsors, affiliated Clubs, event organizers, and officers and members thereof from all claims or liabilities of any kind arising out of his/her participation.

I have read and understand the Sapphires Rhythmic Gymnastics Club Information and Policies (included in the Competitive Program Information document) and agree to the policies stated.

Name of parent/guardian: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## **RGM PIPEDA RELEASE FORM**

The personal information you provide to RGM and different organizing committees for Provincial and National events, is collected under the authority of the PIPEDA privacy bill for Canada. The information is used to determine your eligibility for competitive and recreational opportunities, age related events, to facilitate your enrolment, to administer and evaluate programs/courses of benefit to gymnasts, coaches, Board Members, volunteers and judges, and for insurance and statistical purposes. In addition, personal information may be, from time to time, submitted to major funding bodies in order to verify registration and meet the funding requirements. This information will be transferred in a safe format. It will be password protected if it is transferred electronically, or it will be sent as hard copy.

Registration information required may include: name, age, birth date, address, gender, emergency contact information in case of accident or illness, previous movement experience, position within the club or provincial governing structure, volunteer experience, judging level attained, coaching level attained, performing and/or competitive level attained and citizenship information. Staff members and senior volunteers may have the following information collected and retained: coaching experience, performance appraisals, appointment records, resumes and letters of reference, university equivalency/course information for different aspects of coaching training, attendance records, coach certification numbers, certifications and equivalencies.

Your club's Privacy Officer is responsible for your personal information, and the personal information concerning any minor children, and they ensure that all personal information is handled in a confidential manner, and all reasonable precautions are taken to avoid loss, theft or unauthorized access, disclosure, copying, use or modification. Any requests to view your personal information should be made in writing to the club or to the Provincial office of the RGM Rhythmic Gymnastics Program.

**Please fill in and sign the following form, to indicate that you allow the transmission of personal information to RGM Rhythmic Gymnastics office, and the subsequent transmittal of personal information as indicated in Paragraph one of this document.**

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Date: \_\_\_\_\_ Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Name of Parent/Guardian of participant if under the age of 18: \_\_\_\_\_

Signature of Parent/Guardian of participant if under the age of 18: \_\_\_\_\_

## **RGM IMAGE RELEASE FORM**

Participants at Provincial and National events may have their image, likeness, name (excluding personal address, phone, fax number, and/or email address), province, city/town, and club, as well as rank within Canada and previous performing, competitive, judging, choreographing or coaching history, used in publications and on the internet by RGA as well as its agents and sponsors from time to time. When signing this form, gymnasts, volunteers, coaches, judges and, in the case of minors, their parent/guardian, agree that they have the authority to provide this authorization/approval to RGM and its agents, and sanctioned organizing committees. A facsimile, a scanned and emailed copy, or a photocopy of this form shall be deemed to constitute an original signed document.

**I allow the use of personal information as outlined above, and image in RGM Media, including newsletter, website, poster, brochure, video, sponsorship packages.**

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Date: \_\_\_\_\_ Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Name of Parent/Guardian of participant if under the age of 18: \_\_\_\_\_

Signature of Parent/Guardian of participant if under the age of 18: \_\_\_\_\_