

Cumann Luthchleas Gael Coiste Dunard/Gleann

Cathaoirleach
Colm Toomey
087 6270945



Runai
Jerome Kelly
086 3825281

Gym Facilities - Waiver and Release Form:

I understand and accept that there are inherent risks when participating in physical activities. I declare that I am physically sound and that I am not known to suffer or have a history of suffering from any condition, impairment, disease or other illness that would prevent my use of the gym equipment and/or facilities provided.

I have expressly decided to participate and utilise the facilities and equipment with full knowledge, acceptance and understanding of the risks involved.

I acknowledge and accept that by using the facilities and equipment provided, that Donard/Glen GAA, assumes no responsibility for my actions within the gym facilities. I maintain, at all times, responsibility for my actions and I fully understand that I must take adequate care and precaution when using and storing the gym equipment, so as not to cause damage or injury to myself or a third party.

In addition to giving full consent for my participation, I do hereby waive and release the organisation for any injury that may be suffered by me during the normal course of participation in use of the gym equipment and facilities and that I will not misuse the equipment either recklessly or intentionally. I grant Donard/Glen GAA the right to request emergency medical services for me in the event of a medical necessity.

I declare that I will not use the gym equipment and facilities under the influence of alcohol, drugs, medication or other inebriating substances which may impair my ability to use the facilities or equipment.

I, the undersigned, on my own behalf, knowingly, voluntarily, and freely accept and assume any and all risks, both known and unknown, of injuries or other loss or damage that may be suffered while using Donard/Glen GAA facilities and on their premises.

Members name: (Block Capitals) _____

Members signature: _____

Date: _____