



BROOKLYN, NY

130 Water Street  
Brooklyn, NY 11201  
Tel. 718-797-2872  
Fax.718-797-2857

info@gleasonsgym.com  
www.gleasonsgym.com

### WAIVER FORM

In consideration of my involvement at Gleason's Gym, Inc., annual Master 's Boxing Clinic I acknowledge and agree that:

Boxing is a contact sport and there is an inherent risk of injury or even death in boxing. There is always a risk in physical exercise of injury or even death. Boxing and gym equipment, even if properly used, can cause injury or death.

Therefore, I freely and knowingly assume all risk of bodily injury, including paralysis, dismemberment, death, as well as loss of, or damage of, property arising from any activity done by me at Gleason's Gym, Inc.

I for myself, and on behalf of my heirs, assigns, and next of kin, hereby release, hold harmless, and waive any and all claims against Gleason's Gym, Inc., its officers, officials, agents, and/or employees with respect to any and all such injury, paralysis, dismemberment, death and/or loss or damage which may occur at the premises maintained by Gleason's Gym, Inc.

PARTICIPANT'S NAME (print) \_\_\_\_\_

PARTICIPANT'S SIGNATURE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_  
ZIP: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

DATE SIGNED: \_\_\_\_\_

NOTES: 1. HOW DID YOU HEAR ABOUT GLEASON'S GYM?

\_\_\_\_\_