



FIT GIRLS WAIVER FORM

FIRST NAME:

LAST NAME:

BIRTHDATE:

ADDRESS:

PHONE NUMBER:

EMAIL ADDRESS:

**By providing your email address here, you agree to receive email communication from FIT Communications & FIT Women & Girls.*

Are there any health concerns, including injury or allergies, we should be aware of?

EMERGENCY CONTACT INFORMATION:

NAME:

PHONE NUMBER:

RELATIONSHIPS TO CHILD:

I (print name) _____ understand that the classes with the FIT Girls Events & Girls Events include physical exercise as well as strengthening, stretching, cardiovascular exercise and relaxation. I accept the risk of injury (even serious injury) is always present and cannot be entirely eliminated. If I experience any pain or discomfort, I will listen to my body, modify my exercises, take a break, and seek immediate assistance from my instructor if I feel I am in distress.

The events with us are not a substitute for medical attention and are not intended to examine, diagnose, or treat any condition. Events are not recommended or safe for those with certain medical conditions. I acknowledge that I am competent to decide whether or not to participate in classes, workshops, or events and I will make an informed choice before doing so. I hereby agree to the following:

1. I am fully aware of the risks and hazards involved in participating in all aspects of these events.
2. I understand that it is my responsibility to consult with a physician prior to and regarding my participation in all classes, workshops, and events offered.
3. I represent and warrant that I am physically fit and have no medical condition(s) that would prevent my full participation in classes, workshops, or events.
4. I will update Fit Communications as to changes in my medical condition.
5. In consideration for being permitted to participate in classes, workshops, and events, I assume full responsibility for any risks, injuries, or damages, known or unknown, which I might incur as a result of my participation. I knowingly, voluntarily, and expressively waive any claim I may have against Fit Communications, its owners, instructors, guest presenters, independent contractors, employees, volunteers, and representatives for any injury or damages that I sustain as a result of my participation.
6. I will not engage in any inappropriate conduct that could result in injury to others or myself.
7. I give Fit Communications permission to take and use photos and videos of my likeness.
8. I agree that the laws of Manitoba shall govern this agreement and if any conflict arises between Fit Communications, and me, I will attempt mediation before submitting my dispute to binding arbitration.

I have read the above release and waiver of liability and fully understand its contents and voluntarily agree to all the terms and conditions.

If over the age of 18, please sign below.

If under 18, please have legal guardian sign:

I CONSENT TO THE ABOVE AS THE LEGAL GUARDIAN:

Date:

Signature