

FITGIRLS EVENT INFORMATION & WAIVER FORM

ADULT – PLEASE PRINT

FIRST NAME: _____ LAST NAME: _____

BIRTHDATE: _____ (DDMMYYYY) PHONE: _____

EMAIL ADDRESS: _____

**By providing your email address you agree to receive email communication from FIT Communications & FIT Women & Girls and Tennis MB*

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

EMERGENCY CONTACT: _____ PHONE NUMBER: _____

CHILD/YOUTH

FIRST NAME: _____ LAST NAME: _____

BIRTHDATE: _____ (DDMMYYYY) PHONE: _____

EMAIL ADDRESS: _____

**By providing your email address you agree to receive email communication from FIT Communications & FIT Women & Girls and Tennis MB*

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

EMERGENCY CONTACT: SAME AS ABOVE: _____ **OR**

NAME: _____ PHONE: _____



FITGIRLS EVENT INFORMATION & WAIVER FORM

I (print name) _____ understand that the events with FITGirls/ FIT Communications & Tennis Manitoba include physical activity including 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 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 & Tennis Manitoba 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 expressly waive any claim I may have against Fit Communications & Tennis Manitoba, 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 & Tennis Manitoba 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 & Tennis Manitoba 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.

ADULT please sign below:

Date:

Signature

CHILD: Please have legal guardian sign:

I CONSENT TO THE ABOVE AS THE LEGAL GUARDIAN OF _____

Date:

Name (Print Please)

Signature

