

GYM MOMENTUM LLC COACH/STAFF REGISTRATION

Coach Information

Name: _____
Address: _____ Home Phone:(____) _____
City: _____ State: _____
Country _____ Zip: _____

Coach e-mail: _____

Who should Atlantic call in case of an emergency?

1. Name/Relationship _____ Phone# _____
2. Name/Relationship _____ Phone # _____
3. Name/Relationship _____ Phone # _____

Doctor's Name: _____ Phone # _____

Medical Insurance Co: _____ Policy# _____

Gym Momentum LLC
MEDICAL RELEASE FORM

Please tell us anything medical that we need to be aware of:

Any allergies that we need to be aware of? _____

I, _____ give permission for the staff at GYM MOMENTUM LLC to give me simple first aid or to be transported to a hospital to receive emergency medical treatment.

Signature or participant _____

RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT (“AGREEMENT”)

In consideration of participating in Gym Momentum Training Camp I represent that I understand the nature of this activity and that I am qualified, in good health and in proper physical condition to participate in activities including spotting and demonstrating. I acknowledge that if I believe event conditions are unsafe, I will immediately discontinue participation in the activity. I fully understand that these activities involve risk of serious bodily injury, including permanent disability, paralysis and death, which may be caused by my own actions, or inactions, those of others participating in the event, the conditions in which the event takes place, or the negligence of the “releasees” named below: and that there may be other risks either not known to me or not readily foreseeable at this time: and I fully accept and assume all such risks and all responsibility for losses, cost, and damages I incur as a result of my participation in the activity. I hereby release, discharge and covenant not to sue Gym Momentum its respective administrators, directors, agents, officers, volunteers and employees, other participants, any sponsors, advertisers and if applicable owners and lessors of premises on which the activity takes place, (each considered one of the “Releasees” herein) from all liability, claims, demands, losses or damages, on my account caused or alleged to be caused in whole or in part by the negligence of the “releasees” or otherwise, including negligent rescue operations and future agree that if, despite this release, waiver of liability, and assumption of risk, I or anyone on my behalf, makes a claim against any of the Releasees, I will indemnify, save and hold harmless each of the Releasees from any loss, liability, damage or cost which may incur as the result of such claim. I have read the RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT, understand that I have given up substantial rights by signing it and have signed it freely and without any inducement or assurance of any nature and intend it to be a complete and unconditional release of all liability to the greatest extent allowed by law and agree that if any portion of this agreement is held to be invalid the balance, notwithstanding, shall continue in full force and effect.

I also give permission for Gym Momentum to use my images for marketing purposes and for program development. Any videos that are taken of me during Gym Momentum camp will remain property of Gym Momentum and can only be used by permission.

_____ Date: _____
Printed name of participant

Signature