



CONSENT AND LIABILITY WAIVER RELEASE FORM

I _____ (Parent/Guardian if client is under 18 years old or not conserved) on behalf of _____ (NAME OF ATHLETE) of _____, (City) of _____ (State) hereby affirm that I am entering a course of instruction in physical fitness and performance training. By enrolling in this course I certify that I am cognizant of all of the inherent dangers of physical fitness and therapy, and the basic safety rules for activities connected herewith.

I understand and agree that neither the class nor its owners, operators, agents, or instructors, including but not limited to BC Adaptive Fitness LLC and/or Prader Willi California Foundation, may be held liable in any way for any occurrence in connection with my (or whoever is being released) physical fitness and performance, which may result in injury, death, or damages to me or my family, heirs, or assignees. I further acknowledge and forever release BC Adaptive Fitness LLC in connection directly or indirectly with my physical fitness, training and therapy as result of _____ (NAME OF ATHLETE) and/or _____ (Parent/Guardian) own negligence, which may result in injury, death or damages to me or my family, heirs, or assignees.

_____ (Initial) In consideration of being allowed to enroll in this course I hereby personally assume all risks connected with the course, and I further release the instructors, program, agents, and operators, including but not limited to the persons mentioned for any injury or damage which may be incurred by me while I am enrolled in the fitness or performance course, including all risks connected therewith, whether foreseen or unforeseen; and further to save and hold harmless the program and persons from any claim by me, or my family, estate, heirs, or assignees, arising out of my enrollment and participation I this course.

_____ (Initial) I further state that I am of lawful age and legally competent to sign this aforementioned release; that I understand that the terms herein is contractual and not a mere recital; and that I have signed this document as my own free act.

_____ (Initial) I have fully informed myself of the contents of this aforementioned and release by reading it before I sign it, I have been advised to submit, at my own expense and time, to a medical examination to ensure myself, and assume my own responsibility of physical fitness and capability to perform under the normal conditions of the fitness and therapy program, and am physically fit as tested by a medical examination. I also understand that the owner reserves the right of membership.

Address: _____

Primary Contact: (name, relation, and number)

Secondary Contact: (name, relation, and number)

Authorized Signature

Printed Name

Authorized Signature (Guardian if applicable)

Printed Name



MEDIA RELEASE FORM

I, _____, **(Parent/Guardian OR Athlete Name)** grant permission to BC Adaptive Fitness LLC, hereinafter known as the “Media” to use my image (photographs and/or video) for use in Media publications including:

(Please **Initial**)

_____ - Videos, Email Blasts, Recruiting Brochures, Newsletters, Magazines, General Publications, Website and/or Affiliates.

Please list restrictions if applicable: _____

I hereby waive any right to inspect or approve the finished photographs or electronic matter that may be used in conjunction with them now or in the future, whether that use is known to me or unknown, and I waive any right to royalties or other compensation arising from or related to the use of the image.

Please **initial** the paragraph below which is applicable to your present situation:

_____ - **I AM THE ATHLETE** who is 18 years of age or older and I am competent to contract in my own name. I have read this release before signing below, and I fully understand the contents, meaning and impact of this release. I understand that I am free to address any specific questions regarding this release by submitting those questions in writing prior to signing, and I agree that my failure to do so will be interpreted as a free and knowledgeable acceptance of the terms of this release.

_____ - **I AM THE PARENT OR LEGAL GUARDIAN** of the below named child. I have read this release before signing below, and I fully understand the contents, meaning and impact of this release. I understand that I am free to address any specific questions regarding this release by submitting those questions in writing prior to signing, and I agree that my failure to do so will be interpreted as a free and knowledgeable acceptance of the terms of this release.

Signature: _____ **Date:** _____

Name (please print): _____

Signature of parent or legal guardian: _____

(if under 18 years of age)