

Fitness Bootcamp Participation Waiver and Release

By signing below, I acknowledge and agree to the following:

1. I understand that participation in the Fitness Bootcamp involves physical activity, which may carry a risk of injury.
2. I certify that I have consulted a physician or medical professional regarding my ability to safely participate.
3. I agree to assume all risks of injury, illness, or damages which may result from participating.
4. I hereby waive, release, and discharge the organizers, trainers, and facility from any and all claims or liabilities arising out of or in connection with my participation.
5. I authorize emergency medical treatment if necessary.
6. I have read, understood, and voluntarily agree to this waiver and release.

Participant Name:

Signature: _____

Date:

☐

I have read and agree to the terms above.