## **ATHLETE WAIVER**

Initial here:

Full Name	Email Address		Gender
Street Address	City	Province/Region	Zipcode
Country	Date of Birth		
INFORMED CONSENT/ASSUMPTION OF RIS	K		
I,, ag but not necessarily be limited to, CrossFit Class me fully aware that the fitness programs/class strenuous and can/may push me to the limits of degrees of risk which may include, but are no injury or death, injury or death due to neglige failure of equipment, or injury or death due to result in serious injury or death to myself and/or	es, Personal Training, Group Fitr ses which Modern Athletics offer of my physical abilities. I the und t limited to the following: injury since on the part of myself, my to a medical condition, whether l	ers and in which I desire to participate are of lersigned recognize and understand that the p y to the musculoskeletal and/or cardio respirat training partner, or other people around me, i	odern Athletics. Modern Athletics made f a nature and kind that are extremel rograms/classes are not without varying ory systems which can result in seriou njury or death due to improper use or
Initial here:			
I willingly assume full responsibility for any and a responsibility for any injury or death that may problems that would increase my risk of illness that there exists the possibility of adverse phy changes could include abnormal blood pressu understand the same. With my full understand fitness programs/classes.	result from participation in any or injury as a result of participat sical changes during an exercise re, fainting, disorder of heart i	activity, class, or physical fitness program. I he cion in a fitness program designed by Modern A program, and I fully understand the same. Mo rhythm, stroke, and in very rare instances, h	ereby certify that I know of no medical Athletics. Modern Athletics informed me odern Athletics informed me that these eart attack or even death, and I full
Initial here:			
<b>RELEASE</b> : In full consideration of the above ractivities made available by Modern Athletics, and its agents, officer, principals and employees an arising from, or in any way connected with my or omissions of the above mentioned parties. The any portion of this agreement in held invalid, I minor child, I also give full permission for any per I give permission to call for medial and/or surgice.	nd with my full understanding of d volunteers, of any and all liab participation in Modern Athletics This agreement shall be binding agree that the remainder of the erson connected with Modern A	f all of the above, I hereby waive, release, rem illity, claims, demands, actions or rights of action is fitness programs/classes, including those alleg- upon me, my successors, representatives, hei the agreement shall remain in full legal force an thletics to administer first aid deemed necessar	ise, and discharge Modern Athletics and on, or damages of any kind related to, edly attributed to the negligent action rs, executors, assigns, or transferees. I d effect. If I am signing on behalf of y, and in case of serious illness or injury
Initial here:			
<b>INDEMNIFICATION</b> : I recognize that there is responsibility for any injury that I or any partic mentioned parties, or anyone acting on their beas and costs. I further agree to indemnify a death of any person(s) and damage to proper Athletics.	cipant may cause either to him, behalf, be required to incur atto and hold harmless Modern Athle	herself or to any other participant to due to rney's fees and costs to enforce this agreeme tics, their principals, agents, employees, and v	his/her negligence. Should the above nt, I agree to reimburse them for such volunteers from liability for the injury o

I have fully read and fully understand the foregoing assumption of risk, and release of liability and I understand that by signing it obligates me to indemnify the

T Lagrage to those torms	
☐ I agree to these terms.	
Sign your name below:	
	Please read the Electronic Records and Signature Disclosure  Tagree to use electronic records and signatures

parties named for any liability for injury or death of any person and damage to property caused by my negligent or intentional act or omission. I understand that by

signing this form I am waiving valuable legal rights.