WAREHOUSE ATHLETICS WAIVER

Full Name	Email Address		Gender
Street Address	City	Province/Region	Zipcode
Country	Date of Birth		
EXPRESS ASSUMPTION OF RISK: I, the undersign not limited to: falls which can result in serious in me; injury or death due to improper use or failu or death to myself and or my partner(s).	jury or death; injury or deatl	n due to negligence on the part of mysel	f, my training partner, or other people around
I willingly assume full responsibility for the risks t any activity or class while at, or under direction α		and accept full responsibility for any injury	or death that may result from participation in
RELEASE: In consideration of the above mention offered by Warehouse Athletics, I, the undersign claims, demands, actions or rights of action, which allegedly attributed to the negligent acts or on heirs, executors, assigns, or transferees. If any and effect.	ned hereby release Warehou nich are related to, arise out nissions of the above mention	se Athletics, their principals, agents, empl of, or are in any way connected with n ned parties. This agreement shall be bind	oyees, and volunteers from any and all liability, ny participation in this activity, including those ing upon me, my successors, representatives,
If I am signing on behalf of a minor child, I also gin case of serious illness or injury, I give permit necessary for the well being of the child.			
INDEMNIFICATION: The participant recognizes to financial responsibility for any injury that the participant recognizes to financial responsibility for any injury that the participant fees and costs. I further agree to indemnify and death of any person(s) and damage to proper Warehouse Athletics, at the main building or about any area selected for training by Warehouse Athletics.	rticipant may cause either to chalf, be required to incur at I hold harmless Warehouse A erty that may result from n road. This includes but is not	o him/herself or to any other participant torney's fees and costs to enforce this ag thletics, their principals, agents, employee ny negligent or intentional act or omissi	due to his/her negligence. Should the above preement, I agree to reimburse them for such as, and volunteers from liability for the injury or on while participating in activities offered by
ACCESS: The participant recognizes that there free replacement of the card, and a \$10 non rel		e fee for an access key card, which gives	24/7 access to the gym. There is a one time
Initial here:			
I have read and understood the foregoing assur for any liability for injury or death of any persor form I am waiving valuable legal rights.		, , , , , , , , , , , , , , , , , , , ,	• •
☐ I agree to these terms.			
Sign your name below:			
			c Records and Signature Disclosure ic records and signatures