CLIENT WAIVER

Full Name	Email Address		Gender
Street Address	City	Province/Region	Zipcode
Country	Date of Birth		
Photography/Video Release Participants involved hereby consents to the use of these photographs advertising material produced and/or published by Initial here:	s and/or videos without co		
Waiver and Release of Liability Express assump training. These risks include, but are not limited to training partner, or other people around me; injury mentioned risks may result in serious injury or de to and accept full responsibility for any injury or acknowledge that I have no physical impairments,	o: falls which can result in or death due to improper u ath to myself and or my pa death that may result from	serious injury or death; injury or death duse or failure of equipment; strains and sprtner(s). I willingly assume full responsible participation in any activity or class whi	ue to negligence on the part of myself, my prains. I am aware that any of these above ility for the risks that I am exposing myself
Release: In consideration of the above mentione activities offered by CrossFit LT, I, the undersigned claims, demands, actions or rights of action, which allegedly attributed to the negligent acts or on representatives, heirs, executors, assigns, or transferred in full legal force and effect. If I am signing first aid deemed necessary, and in case of serious child to a medical facility deemed necessary for the activities offered by CrossFit LT. Therefore the parany other participant due to his/her negligence. Structure participals, agents, employees, and volunteers from intentional act or omission while participating in recreational areas, playgrounds, areas adjacent foregoing assumption of risk, and release of liabil death of any person and damage to property caus legal rights.	and hereby release CrossFirth are related to, arise out on hissions of the above meansferees. If any portion of on behalf of a minor child, is illness or injury, I give pene well being of the child. Inticipant accepts financial rehould the above mentioned inburse them for such feem liability for the injury or direction activities offered by Cross to main building, and/or lity and I understand that by	t LT, their principals, agents, employees, of, or are in any way connected with my pentioned parties. This agreement shall this agreement is held invalid, I agree the I also give full permission for any person emission to call for medical and or surgindemnification: The participant recognized esponsibility for any injury that the participal parties, or anyone acting on their behals and costs. I further agree to indemnification for any person(s) and damage to prostific LT, at the main building or abroad. The any area selected for training by Crossey signing it obligates me to indemnify the	and volunteers from any and all liability, articipation in this activity, including those be binding upon me, my successors, nat the remainder of the agreement shall connected with CrossFit LT to administer ical care for the child and to transport the is that there is risk involved in the types of pant may cause either to him/herself or to f, be required to incur attorney's fees and fy and hold harmless CrossFit LT, their perty that may result from my negligent or This includes but is not limited to parks, is Fit LT. I have read and understood the parties named for any liability for injury or
☐ I agree to these terms.			
Sign your name below:			
		<u>Disclosure</u>	ectronic Records and Signature onic records and signatures