

# WAIVER FORM

## FTY LAB WAIVER AND RELEASE OF LIABILITY:

If the participant disagrees with any of the following statements, then it is not recommended that they continue with the registration process.

1. The participant does not feel pain in their chest when they do physical activity.
2. In the past month, the participant has not had any chest pain when they are doing physical activity.
3. The participant does not lose balance because of dizziness or lose consciousness when taking part in physical activity.
4. The participant does not have a bone or joint problem that could be made worse by a change in physical activity levels.
5. The participant is not currently prescribed any medication for a heart or blood pressure condition.
6. The participant has not recently had surgery.
7. The participant does not know of any other reason why they should not participate in physical activity at the centre.

## READ BEFORE AGREEING WITH THE TERMS AND CONDITIONS:

In Consideration of being allowed to participate in any activities at FTY Lab, the undersigned, acknowledges and agrees that:

1. I am aware of the risk of injury that the sport endures; therefore, I agree to assume all risks and expenses due to an injury that may occur as a result of involvement in a competitive sport.
2. I understand that I would be using the Health & Fitness facilities entirely at my own risk and waive any legal recourse for damages to myself or property arising from my participation.
3. I understand that I may be photographed at any time for FTY to use for all media, including online, now or hereafter.

**I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT AND FULLY UNDERSTAND ITS TERMS. I ALSO UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY AGREEING WITH THE TERMS AND CONDITIONS, AND SIGN FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.**

# WAIVER