

Bobby Aldridge Fitness Training
Certified Strength & Conditioning Specialist (CSCS)
Flexibility, **A**gility, **S**peed, **S**trength, **S**tamina, **T**raining (Fasst Results)
415-601-3364 E-mail: Info@BobbyAldridge.com

Name _____ Date _____

Address _____ City _____ Zip _____

Home _____ Cell _____ E-mail _____ Last Physical _____

Training Fee: _____ Birthday: _____ Age: _____

Do you have **ANY** physical problems past or present that will not allow you to exercise?
Neck / Back / Rotator Cuff / Knees / Heart Problems etc...Can you jump Rope? Yes No

Goals: Strengthen specific area, lose weight, prepare for an athletic event etc... _____

Initials: _____

**WAIVER AND RELEASE, ASSUMPTION OF RISK AND PARENTAL
CONSENT AND INDEMNITY AGREEMENT**

In consideration of my minor child being permitted to participate with Bobby Aldridge in Athletic Training I agree:

1. I understand the nature of **Bobby Aldridge's** activities and the Minor's Experience and capabilities and believe the Minor to be qualified to participate in such Activity. I further acknowledge that I and the Minor are aware the activity will be conducted in facilities open to the public during the Activity. I further agree and warrant and will instruct the Minor that if at any time the Minor believes conditions to be unsafe, he/she will immediately discontinue further participation in the Activity.

2. I FULLY UNDERSTAND that: (a) **Bobby Aldridge's** Activities involve risks and dangers of **SERIOUS BODILY INJURY, INCLUDING PERMANENT DISABILITY, PARALYSIS AND DEATH** ("Risks"); (b) these Risks and dangers may be caused by the Minor's own actions, or inaction's, the actions or inaction's of others participating in the Activity, the condition in which the Activity takes place, or THE NEGLIGENCE OF THE "RELEASEES" NAMED BELOW; (c) there may be other risks and social and economic losses either not known to me or not readily foreseeable at this time; and **I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES** incurred as a result of the Minor's Participation in the Activity.

3. **I HEREBY RELEASE, DISCHARGE, COVENANT NOT TO SUE, AND AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS Bobby Aldridge's**, their respective administrators, directors, agents, officers, volunteers, and employees, other participants, any sponsors, advertisers, and if applicable, owners and lessors of premises on which the Activity takes place (each considered one of the "Releasees" herein) from all liability, claims, demands, losses, or damages on the minor's account caused or alleged to be caused in whole or in part by the negligence of the "Releasees" or otherwise, including negligent rescue operations and further agree that if, despite this release, I, the minor, or anyone on the Minor's behalf makes a claim against any of the Releasees named above, **I WILL INDEMNIFY, SAVE AND HOLD HARMLESS EACH OF THE RELEASEES FROM ANY LITIGATION EXPENSES, ATTORNEY FEES, LOSS LIABILITY, DAMAGE OR COST ANY MAY INCUR AS THE RESULT OF ANY SUCH CLAIM.**

I HAVE READ THIS AGREEMENT, FULLY UNDERSTAND IT'S TERMS, UNDERSTAND THAT I AND THE MINOR HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND HAVE SIGNED IT FREELY AND WITHOUT ANY INDUCEMENT OR ASSURANCE OF ANY NATURE AND INTEND IT TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW AND AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID THAT THE BALANCE, NOTWITHSTANDING, SHALL CONTINUE IN FULL FORCE AND EFFECT.

Name of Minor Child (Please print)

Signature of Parent or Legal Guardian

Signature of Witness

Date

Printed Name of Parent or Legal Guardian

Printed Name of Witness