



Sweat Evolution Group Training

ASSUMPTION OF RISK, WAIVER AND RELEASE FROM LIABILITY AGREEMENT

I, _____ (Participant), acknowledge that I am voluntarily participating in the GROUP TRAINING provided by Sweat Evolution at Warren High School, 8141 De Palma Street, Downey, CA 90241.

ASSUMPTION OF RISK. I am aware of the risks and dangers of serious bodily injury, including, but are not limited to, potential of sprained muscles and ligaments, broken bones, fatigue, permanent disability, or death, and that these risks and dangers may be caused by the action or omissions of my own, of others, and/or of the condition in which the activities take place as a result of a rigorous level of physical activity.

WAIVER AND RELEASE. I hereby waive all claims against Sweat Evolution, Warren High School, their employees, staff and any other people officially connected with this Group Training, and release each of them from any and all liability for injuries, damages, costs, or expenses arising out of my participation in the Group Training. Specifically, I release each of them from any liability or responsibility for my physical condition for the condition or selection of course route and for the presence or actions of any other participants. I understand that participation in this Group training is strictly voluntary. I verify that I will be responsible for any medical costs I may incur as a result of my participation in this Group Training.

I have read and fully understand the above Agreement.

CLIENT NAME (PARTICIPANT)

SIGNATURE

DATE

PARENT/GUARDIAN NAME (if under 18)
Please Print

PARENT/GUARDIAN SIGNATURE