



22 Hoops REGISTRATION/WAIVER

PLEASE PRINT

Participant Name: _____ Cell: _____

Email: _____

Emergency Contact: _____ Phone: _____

Relationship to Participant: _____

INFORMED CONSENT FOR PARTICIPATION

I desire to engage voluntarily in training given by 22 Hoops. I understand that the activities are designed to place a gradually increasing workload on the body in order to improve overall fitness. I understand that I am responsible for monitoring my own condition throughout my workouts and should any unusual symptoms occur, I will cease my participation and inform the staff of the symptoms.

In signing this consent form, I affirm that I have read, accept and understand this form in its entirety and that I understand the nature of exercise. I know that there may be risks associated with training and willingly accept those possibilities. I know that it is my responsibility to ensure my own safety. I take full responsibility for my own health and safety in participating in the training.

AGREEMENT AND WAIVER / RELEASE OF LIABILITY

In consideration for being allowed to participate in this activity, which I do freely and voluntarily for my own personal benefit, I hereby take action for myself, my executors, administrators, heirs, next of kin, successors and assigns to:

Waive, release and discharge from any and all liability to 22 Hoops, 4405 Schenley Farms Terrace Pittsburgh Pa 15213, ANY school facility, or ANY other facility that 22 Hoops utilizes, their elected and appointed officials, employees, students, agents, and volunteers for my death, disability, personal injury, property damage, or property theft, or actions of any kind which may hereafter accrue to me.

Indemnify and hold harmless 22 Hoops, 4405 Schenley Farms Terrace Pittsburgh, PA 15213, ANY school facility, or ANY any facility that 22 Hoops utilizes, their elected and appointed officials, employees, students, agents, and volunteers, from any and all liabilities and claims made by other individuals or entities as a result of or relating to my participation in this activity.

Therefore, intending to be bound and as a condition of being allowed to participate in training have freely signed this waiver on the date indicated.

Participant Signature: _____ Date: _____

Parent/Guardian Signature (If under 18 yrs old): _____