

READ CAREFULLY. THIS IS A RELEASE OF LIABILITY, ASSUMPTION OF RISK, INDEMNIFICATION, AND WAIVER OF LEGAL RIGHTS.

1. I request permission to participate in fitness activities conducted by Stephen J. Curran (hereinafter "Steve Curran"). I acknowledge that the fitness activities can be HAZARDOUS and could result in personal injury or death and/or in damage to property. I expressly assume all risks to me and my property, that may be associated with participating in the fitness activities, including without limitation my use of equipment provided by Steve Curran of any kind.
2. In consideration of receiving permission to take part in the fitness activities, I, on my own behalf and on behalf of my heirs, administrators, and assigns, fully release and discharge Steve Curran and his respective operators, owners, affiliates, partners, officers, directors, employees, agents, contractors, insurers and assigns (hereinafter "Curran Entities") from all claims, demands, liability and causes of action for injury sustained by me, including death, or any damages sustained by my property during my participation in the fitness activities. My release includes, but is not limited to, release of all claims, demands, liability and causes of action for injury sustained by me or by my property due in whole or in part to my own negligence and to any risks avoidable by the exercise of due care by the Curran Entities. I agree to indemnify and hold harmless the Curran Entities from any claim, demand, liability or cause of action for any injury to me or my property. This release includes, but is not limited to, the release of claims based on wrongful death that could be brought by my heirs, administrators or assigns.
3. This release, assumption of risk, indemnification, and waiver of legal rights applies to any and all times that I participate in the fitness activities. I understand that this document will be kept on file and that it applies each time I participate in any fitness activities.
4. I certify that I am over 18 years of age and of sound mind. (If under 18, I certify that I have the permission of my parents or guardians to participate, as indicated by their signature below.)

I HAVE CAREFULLY READ THIS PAPER AND I FULLY UNDERSTAND IT AND HAVE SIGNED IT VOLUNTARILY.

Dated this _____ day of _____, _____.

Print Name of Participant

Signature of Participant

Print Name of Parent or Guardian

Signature of Parent or Guardian

WITNESS: _____