

Print Name of Staff Member Accepting Waiver or Witnessing Signature(s) _____ Check when information has been added to Database

LIABILITY WAIVER and HOLD HARMLESS AGREEMENT

By signing this document, you will waive certain legal rights, including the right to sue.

Name _____ Email (held privately) _____

Parent / Legal Guardian Name (if applicable) _____

Address: _____ Apt# _____ City _____ State _____ Zip _____

D.O.B. _____ Age _____ Phone (land) _____ (cell) _____ (work) _____

Emergency Contact _____ Phone (home) _____ (cell) _____ Relationship _____

List any medical issues that might interfere with your ability to participate in our program: _____

In consideration of being allowed to participate in any way in the Discipline Pilates program, related events and activities, the undersigned acknowledges, appreciates and agrees that:

1. The risk of injury from activities involved in Pilates is significant, including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist; and,
2. I knowingly and freely assume all such risks, both known and unknown, even if arising from the negligence of the releases or others, and assume full responsibility for my participation; and,
3. I willingly agree to comply with the stated and customary terms and conditions for participation. If, however I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately; and,
4. I, for myself and on behalf of my heirs, assigns and next of kin, hereby release and hold harmless Discipline Pilates, their officers, officials, agents and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event ("Releasees"), with respect to all and any injury, disability, death, or loss or damage to person or property, whether arising from the negligence of the Releasees or otherwise, to the fullest extent permitted by law; and,
5. I/we expressly grant to the Releasees, and any third party authorized by the Releasees, the right to film, videotape, photograph, record my voice and make any reproductions of my physical likeness and voice, and the irrevocable right in perpetuity to use, display, and digitally enhance or alter in any manner, such likeness in any media now or hereafter devised, including, but not limited to, the exhibition and/or online use, broadcast, theatrically or on television, cable or radio, of any motion picture film, video tape, DVD, CD or any internet service or program in which such likeness may be used, or any published articles in which such likeness may be printed, used or incorporated, and in the advertising and publicizing of the Releasees and Releasees' products.

This liability waiver is made and executed in the State of Georgia and shall be governed by, enforced in and construed in accordance with the laws of the state of Georgia.

I HAVE READ THIS LIABILITY WAIVER AND HOLD HARMLESS AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

PARTICIPANT'S SIGNATURE DATE

FOR PARENTS/GUARDIANS OF PARTICIPANTS OF MINORITYAGE
(UNDER AGE 18 AT TIME OF REGISTRATION)

This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release, as provided above, of all the Releasees, and, for myself, my heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the Releasees from any and all liabilities incident to my minor child's involvement or participation in these programs as provided above, even if arising from their negligence, to the fullest extent permitted by law.

PARENT/GUARDIAN'S SIGNATURE _____ DATE _____
EMERGENCY PHONE: _____