

FITNESS FACILITIES REGISTRATION FORM

PLEASE PRINT

Name:		
Address:		
City/Town:	Province:	Postal Code:
Telephone Home/Cell:		Work:
Email:		
D.O.B:		Is this person a minor? Yes $\ \square$ No $\ \square$
Note: Parent or legal guardian must complete accompanied by an adult 18 yrs or over while a		sign the Waiver for all minors, and minors must be B.
Emergency Contact		
Name:		
Address:		Postal Code:
Phone Number:		
Name:		
Pricing: Includes access to all facilities, Gym, Y	oga Studio, Se	ensory koom and Family koom:
Day Pass (one visit) - \$15		
Individual, Expires after one use		
30 Day Membership (18-59 Yrs of Age) - \$35 (60+ Yrs of Age) - \$30 Individual, Expires 30 days after issue, Unlimited uses		Annual Membership
		18-59 Yrs of Age) - \$375
		(60+ Yrs of Age) - \$300
	ed uses	Individual, Expires 12 months after issue, Unlimited u
Form of payment:		

PARTICIPATION LODGE GREY BRUCE ("PLGB") FITNESS FACILITIES RELEASE AND INDEMNITY AGREEMENT & LIABILITY WAIVER

Please read our liability waiver carefully. By signing this waiver, you accept the risks and terms within.

1. Assumption of Risk

I acknowledge and understand that there are inherent risks associated with using the fitness facilities at Participation Lodge Grey Bruce ("PLGB"), including, but not limited to, the Gym, Yoga/Dance Studio, and Sensory Room (collectively, "the Facilities"). These risks include the potential for serious injury, disability, or death, as well as damage to personal property. These risks may arise from my own actions or inactions, the actions or inactions of others, or the condition of the Facilities themselves.

2. Waiver and Release

In consideration of being allowed to use the Facilities, I hereby agree to release, waive, discharge, and hold harmless PLGB, its directors, officers, employees, agents, and volunteers (collectively, "the Releasees") from any and all liability, claims, demands, or causes of action that I, my heirs, assigns, personal representatives, or next of kin may have for injuries or damages arising out of my use of the Facilities. This waiver includes, but is not limited to, injuries or damages caused by the Releasees' negligence or the Facilities' condition.

3. Indemnity Agreement

agree to indemnify and hold harmless the Releasees from any and all claims, actions, suits, procedures, costs, expenses, damages, and liabilities, including attorney's fees, arising out of or related to my use of the Facilities, whether such claims arise from the negligence of the Releasees or otherwise.

4. Acknowledgment of Rules and Policies

I have read and agree to comply with the PLGB Fitness Facility Policy, which includes rules and guidelines for the safe and responsible use of the Facilities. I understand that failure to follow these rules may result in the suspension or termination of my access to the Facilities.

5. Health and Fitness Acknowledgment

I acknowledge that I have been advised to consult with my healthcare provider before engaging in any fitness or wellness program at the Facilities. I represent that I am in good health and physically capable of participating in the activities at the Facilities. I understand that the Releasees are not responsible for providing medical advice or determining my fitness to participate in activities at the Facilities.

6. Signature and Acknowledgment

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

Signature:	Date:
Print Name:	
If the participant is under 18 years of age, a	parent or guardian must sign below:
Parent/Guardian Signature:	Date:
Print Name of Parent/Guardian:	