

**Texas Ultra Fit (TUF) Boot Camp  
Waiver and release of Liability**

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_ City, Zip: \_\_\_\_\_

Cell # for texts: \_\_\_\_\_ Email: \_\_\_\_\_

In an emergency, I would like TUF Boot Camp to Call: \_\_\_\_\_ Phone #: \_\_\_\_\_

**Health Questions – *Please circle any that apply or select the appropriate response***

**Do you experience or have you ever experienced Chronic:** Back pain - Knee pain - Shoulder pain - Other pain of any type - N

Any past injury or illness that **could** create pain or discomfort during intense fitness training **Y N** How often do you exercise weekly? \_\_\_\_\_

Any history of: High blood pressure, Respiratory, Diabetes, Cardiac issues or Stroke - **N** Any other health conditions not listed? **Y N**

Please explain any positive response to any above question and anything else, we may need to know about? (you may use the back if necessary)

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**Waiver and Release of Liability**

**Express assumption of risk:** I, the undersigned, am aware that there are significant risks involved in all aspects of physical training. These risks include, but are not limited to: falls which can result in serious injury or death; injury or death due to negligence on the part of myself, my training partner, or other people around me; injury or death due to improper use or failure of equipment; strains and sprains. I am aware that any of these above mentioned risks may result in serious injury or death to me and or my partner(s).

I willingly assume full responsibility for the risks that I am exposing myself to and accept full responsibility for any injury or death that may result from participation in any activity or class while at all TUF BC , or under direction of TUF Boot Camp or any TUF Boot Camp trainer.

I acknowledge that I have no physical impairments, injuries, or illnesses that will endanger me or others. **Initials:** \_\_\_\_\_

**Release:** In consideration of the above mentioned risks and hazards and in consideration of the fact that I am willingly and voluntarily participating in the activities offered by TUF Boot Camp. I, the undersigned hereby release TUF Boot Camp, their principals, agents, employees, and volunteers from any and all liability, claims, demands, actions or rights of action, which are related to, arise out of, or are in any way connected with my participation in TUF Boot Camp, including those allegedly attributed to the negligent acts or omissions of the above mentioned parties. This agreement shall be binding upon me, my successors, representatives, heirs, executors, assigns, or transferees. If any portion of this agreement is held invalid, I agree that the remainder of the agreement shall remain in full legal force and effect.

If I am signing on behalf of a minor child, I also give full permission for any person connected with TUF Boot Camp, to administer first aid deemed necessary, and in case of serious illness or injury, I give permission to call for medical and or surgical care for the child and to transport the child to a medical facility deemed necessary for the well-being of the child.

**Indemnification:** The participant recognizes that there is risk involved in the types of activities offered TUF Boot Camp. Therefore the participant accepts financial responsibility for any injury that the participant may cause either to him/herself or to any other participant due to his/her negligence. Should the above mentioned parties, or anyone acting on their behalf, be required to incur attorney's fees and costs to enforce this agreement, I agree to reimburse them for such fees and costs. I further agree to indemnify and hold harmless TUF Boot Camp AND their principals, agents, employees, and volunteers from liability for the injury or death of any person(s) and damage to property that may result from my negligent or intentional act or omission while participating in activities offered by TUF Boot Camp at the their facilities or abroad. This includes but is not limited to parks, recreational areas, playgrounds, areas adjacent to their main facility, and/or any area selected for training by TUF Boot Camp

**I have read and understood the foregoing assumption of risk, and release of liability and I understand that by signing it obligates me to indemnify the parties named for any liability for injury or death of any person and damage to property caused by my negligent or intentional act or omission.**

**I understand that by signing this form I am waiving valuable legal rights.**

Signature of participant: \_\_\_\_\_ Date: \_\_\_\_\_

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If the participant is **under** the age of **18**,

Signature of Parent/Guardian: \_\_\_\_\_ Print Name: \_\_\_\_\_ Date: \_\_\_\_\_