



FitDC: Fitness Series Waiver

Last Name (Primary Participant)	First Name	M.I.	Date of Birth		
Home Address	City	State	Zip		
Phone	E-mail				
Children Under Age of 18	Date of Birth	M/F	Children Under Age of 18	Date of Birth	M/F

IN CASE OF EMERGENCY, PLEASE CONTACT: _____ Relationship: _____ Phone: _____
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WAIVER

Please read this form carefully and be aware that by utilizing the FitDC: Fitness Series you agree to waive and release all claims that may result from your participation and/or the participation of those children you are a parent/guardian to. With knowledge and appreciation in the right of injury, I agree as follows:

Acknowledgment/Assumption of Risk of Injury

I have been fully informed of all the details of the City of Chandler program and have received satisfactory answers to all questions I have concerning activities during the FitDC: Fitness Series, and inherent risks. I recognize and acknowledge that there may be a risk of bodily injury or death. I agree to and assume the full risk of any injury, including death, and of all costs, damages, and/or losses that I may sustain as a result of participation in activities associated with this event.

Waiver and Release of Claim for Injury

I hereby agree to, and do waive, release and relinquish all claims of every kind, known and unknown, present and future, that I may have against the City of Chandler, the Recreation Division, the instructors of FitDC, and their officers, agents, servants and employees, arising out of, connected with, or in any way related to, the program or my participation therein.

Indemnify and Defense

I understand that the City of Chandler does not carry accident insurance for programs and events
 I agree to indemnify and hold harmless the City of Chandler from all losses or injuries sustained during my participation
 I also give my permission for any photos/videos taken of participants to be used by the City of Chandler

Signature of Primary Participant:

**REGISTRATION & WAIVER COVERS THE FOLLOWING DATES:
 SEPTEMBER 6, 13, 20, & 27, 2018; JANUARY 24 & 31, FEBRUARY 7, 14, 21, & 28, MARCH 7 & 14, 2019**

Signature of Participant (If under 18*, signature of parent or guardian is required.) _____

Date _____