



CrossFit South Wake/CrossFit Kids, Pre-Teen, & Teen Registration/Waiver Form

This form and waiver must be completed and signed by a legal guardian before a child can participate in the CrossFit Kids, Pre-Teen, & Teen programs.

INFORMATION							
Name:					DOB:		
Fitness/Exercise Experience	Years:			Age:			Grade:
School							
Medical Concerns: Is there ANYTHING we should know to ensure your child is receiving the highest quality training and/or anything that would preclude your child from participating in CrossFit Kids/Pre-Teen/Teen activities. I.e. allergies (food, bees, etc.), heart conditions, asthma, etc.							

HOUSEHOLD CONTACT INFORMATION (Please * Primary Emergency Contact Number)								
Address					City			Zip
Phone (Home)	(Father/Legal Guardian				
)							
Cell-Primary	(Mother/Legal Guardian				
)							
Cell-Primary	(
)							
Primary Email Address								

PICK UP/DROP OFF INFORMATION [I/We hereby request that the participant/minor named above be released from CrossFit South Wake only to persons whose SIGNATURES appear below. I/We understand that CrossFit South Wake will adhere and respond ONLY to this written request, and that any change must be made in writing accompanied by appropriate signatures. CrossFit South Wake staff will require signature(s) prior to the release of the participant/minor IF identity is in question.] (Please provide ALL persons OTHER than parent/guardian(s) who are authorized to pick up your child from CrossFit South Wake—i.e. brother/sister, uncle, family friend, etc.)	
Name & Cell:	Signature: _____ Relationship: _____ Cell/Contact Info: _____
Name & Cell:	Signature: _____ Relationship: _____ Cell/Contact Info: _____



AUTHORIZATION AND RELEASE OF ALL CLAIMS

It is expressly agreed that participation in the CrossFit South Wake Kids Program shall be undertaken by the parent/guardian at his or her risk. It is further agreed that CrossFit South Wake shall not be liable for any injuries or damages to the participant, nor the subject of any claim, injury, or damages, whatsoever, including but not limited to, damages resulting from act of active or passive negligence on the part of CrossFit South Wake, its successors or its officers or agents. Initials: _____

It is specifically agreed that CrossFit South Wake shall not be responsible or liable to the parent/guardian or CrossFit Kids participant for articles lost or stolen in the training center. CrossFit South Wake shall not be responsible or liable for loss or damage to any other property of parent/guardian or CrossFit Kids participant including their automobile and contents thereof. Initials: _____

It is also agreed that any damages to the training center's facilities (CrossFit South Wake) or property or property of any parent/guardian or CrossFit Kids participant by any other parent/guardian or CrossFit Kids participant, is the sole responsibility of the offending parent/guardian or CrossFit Kids participant. I have identified all medical problems that CrossFit South Wake should be aware of and have provided all special instructions on the Registration Form and Emergency Contact section. I understand that photographic, video and/or other images of my child may be obtained and used in the media, on the CrossFit South Wake website, or in other CrossFit South Wake promotional and publicity materials at the discretion of CrossFit South Wake, and that if I do not wish for my child's image to be used for these purposes I must request so in writing. Initials: _____

If I am signing on behalf of a minor child, I also give full permission for any person connected with CrossFit South Wake, LLC 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. Initials: _____

Indemnification: The parent/guardian of the participant recognizes that there is risk involved in the types of activities offered by CrossFit South Wake, LLC. Therefore the parent/guardian of 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 CrossFit South Wake, LLC, 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 CrossFit South Wake, LLC, at the main building or abroad. This includes but is not limited to parks, recreational areas, playgrounds, areas adjacent to main building, and/or any area selected for training by CrossFit South Wake, LLC. Initials: _____

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. Initials: _____

I understand that by signing this form I am waiving valuable legal rights. I certify that I am the managing conservator of this child or children, am authorized to sign this waiver, and accept the terms of this Agreement.

Initials: _____

I expressly agree that this release, waiver and indemnity agreement is intended to be as broad and inclusive as permitted by the laws of the State of North Carolina. This release is an agreement between the parties. This agreement and the terms of this release are contractual and not a mere recital. Initials: _____

I give permission for _____ to participate in the CrossFit South Wake Kids Program.

Signature of Parent(s)/Guardian(s): Mother: _____ Father: _____

Printed Names: Mother: _____ Father: _____ Date: _____

Reviewed By (Print): _____ Signature: _____ Date: _____