



ATHLETE: _____

ADDRESS: _____

In consideration of the Athlete's right to participate in the Program, I agree as follows:

1. I authorize the Athlete to participate in the East 80 Program.
2. **I acknowledge the Athlete's participation in the Program involves the risk of serious bodily injury, death, and/or property damage.** I assume and accept all risk of bodily injury, death, property damage and other harm connected to the Athlete's participation in the program. I acknowledge that I am responsible for any and all medical expenses due to the Athlete's illness or injury in connection with the Program.
3. **I acknowledge that the Program may involve strenuous and hazardous physical activities** and I certify that the Athlete is in excellent physical health and has no physical limitations that would prevent the Athlete from participating in the Program. I grant permission to East80Crossfit's directors and staff to provide the Athlete with emergency medical treatment if needed.
4. I release and agree not to sue East80Crossfit, it's staff, directors, appointed officials, volunteers, affiliate owners from all present and future claims that may be made by me, my family, estate heirs, or assigns for property damage, personal injury, or wrongful death arising as a result of my participation in the Program wherever, whenever or however the same may occur.
5. I understand that the Program may be photographed, videotaped or otherwise recorded, and I agree to let East80Crossfit use my name, likeness and demographic information free of charge in any manner and for any purpose in any media now known or hereafter developed.
6. I certify that I am the parent or the legal guardian of the Athlete.
7. I acknowledge that I have read the Release, fully understand its contents and have signed below of my own free will.

SIGN PARENT NAME: _____

PRINT PARENT NAME: _____

PHONE: _____ **DATE:** _____