

Self Defense Workshop Registration

Register at the front desk or by calling 630.654.2442. Groups may arrange special class by contacting Patrick Cruise at pcrui@obrfc.com.

Name: _____ Email: _____

Address: _____

Phone: _____ Class Date: _____ Class Time: _____

How did you hear about us? _____

Because physical exercise can be strenuous and subject to risk of serious injury, the club urges you to obtain a physical examination from a doctor before using any exercise equipment or participating in any exercise or self-defense activity. You (each member, guest, and all participating family members) agree that if you engage in physical exercise or activity, or use any club amenity or program on premise or off premises including any sponsored club event, you do so entirely at your own risk. **If the student is a minor: I, the undersigned, as a parent or guardian of the participant, certify that I have read the above contract. I consent to the minor/student receiving the instruction applied for and I agree to the provisions of the contract for myself and said applicant.**

You agree that you are voluntarily participating in these activities and use of these facilities and premises and assume all risks of injury, illness or death. We are not responsible for any loss of your personal property. Any recommendations for changes in diet, use of food supplements, weight reduction are entirely your responsibility and you should consult with a physician prior to undergoing any dietary/supplement changes.

This waiver and release of liability include, without limitation, all injuries which may occur as a result of; (a) you use of all amenities and equipment in the facility and your participation in any activity, class, program, personal training or instruction; (b) the sudden and unforeseen malfunction of any equipment; (c) our instruction, training, supervision, or dietary recommendations; and (d) your slipping and/or falling while in the club, or on the club premises, including adjacent sidewalks and parking area.

You acknowledge that you have carefully read the "waiver and release" and fully understand that it is a release of liability. You expressly agree to release and discharge the health club and all affiliates, employees, agents, representatives, successors, or assigns, from any and all claims or causes of action against the club for personal injury or property damage.

To the extent that statute or case law does not prohibit release for negligence, this release is also for negligence on the part of the club, its agent, and employees. If any portion of this release from liability shall be deemed by a court of competent jurisdiction to be invalid, then the remainder of this release from liability shall remain in full force and effect and the offending provision or provisions severed here from.

By signing this release, I acknowledge that I understand its content and that this release cannot be modified orally.

Signed _____ (self/parent/legal guardian)

Printed Name: _____ Date: ___/___/___

For Office Use Only

Amount Paid: _____

Date Paid: _____

Employee Initials: _____

Circle One: Cash Check Visa MC Discover ON ACCOUNT