

WAIVER OF LIABILITY FOR THE WIARTON FITNESS CENTRE

THIS AGREEMENT AFFECTS YOUR LEGAL RIGHTS. READ IT CAREFULLY!

PLEASE CONSULT YOUR PHYSICIAN PRIOR TO STARTING AN EXERCISE OR FITNESS

PROGRAM AND PRIOR TO USING THE WIARTON FITNESS CENTRE FACILITY

You, the member are aware that there are risks associated with participating in Fitness activities and exercise. Your participation is completely voluntary and you freely accept and fully assume all responsibility for all risks and all possibilities of personal injury, death, property damage or loss to yourself or any other person as a result of your participation in fitness activities. You and your heirs, next of kin, executors, administrators and assigns agree:

1. _____ To waive all claims, known or unknown that you have or may have in the future against the Warton Fitness Centre, including their owners, officers, directors, agents, employees, volunteers, business operators, independent contractors and site property owners or lessees (the "Organization.")
2. _____ That Warton Fitness Centre is not liable or responsible for any damage to, loss or theft of your property.
3. _____ To release and forever discharge The Warton Fitness Centre from all liability for any personal injury, death, property damage or loss resulting from your participation in fitness activities due to any cause including but not limited to negligence (failure to use such caution as a reasonable, prudent and careful person would use under similar circumstances), breach of any duty imposed by law, breach of contractor mistake in error of judgement of Warton Fitness Center.
4. _____ To be liable for and to hold harmless and indemnify Warton Fitness Centre from all actions, proceeding, claims, damages, cost demands, including court costs on a solicitor and own client basis, and liabilities of whatsoever nature or kind arising out of or in any way connected with your participation in fitness activities.

PARTICIPANT'S NAME (please print) _____

PARTICIPANT'S SIGNATURE: _____

DATE: _____

EMAIL: _____

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