Grady's Family Fun Day 2019

Adult Registration Form

Name:			_ Male	emale	
Email:		Phone #			
Street Address:					
City:	State:		Zip Code:		
Choose Event:					
Run/Walk	Spin/Exercise Class				
\$20	\$30 for 1 \$50 for 2				
Shirt Size:					
xs: S: S	M:	XL:	XXL:	XXXL:	
*Shirts are sleeveless. If yo	ou would prefer a regular shor	rt sleeve shirt, ple	ase note here	*	
Fitness Center, during which I will may exertion, which may be strenuous and 1. I understand that it is my res fit and have no medical condition 2. In consideration of being per might incur as a result of my partid 3. In further consideration of be representatives, all claims I may h damages are knowingly and inteninjury or death caused by any othe 4. By executing this Release ar limitation the instructor manual, suinformation, which are owned excluding the Materials, I agree and that all Materials will only be used.	reby agree to the following: I will be partically be riding a bike and receive information a may cause injury, and I am fully aware of ponsibility to consult with a physician prior that would prevent my full participation in the mitted to participate in the Program, I agree cipation regardless of whether any such rising permitted to participate in the Program have against CPSC for all injury or damage tionally caused by CPSC. Accordingly, I have reason including the gross negligence of the Waiver of Liability, I acknowledge that the upplemental teaching aids and/or continuing lusively by CPSC and that CPSC has expetent at I will not copy, reproduce, hereinafted used to teach the Program.	and instruction about heal the risks and hazard involver to and regarding my parthe Program. He to assume full responsions sks are communicated to m, I knowingly, voluntarily es of any nature whatsoe ereby fully and forever reportothers acts of CPSC or the materials and informating education materials (contended considerable time er devised, throughout the	Ith and fitness. I recognized blved. ticipation in the Program. sibility for any risks, injuried be by CPSC. and expressly waive, on lever that I may sustain as allease, waive, discharge at third parties. tion provided to me by CF collectively, the "Materials" and investment in creating everyld to any person or expression.	e that fitness classes required in the set of damages, known or understanding the set of damages, known or understanding the set of my participation and covenant not to sue CFPSC and its agents including the Materials. As an expentity without CPSC's prior	and I am physical anknown, which I and/or legal a unless such PSC for any such and without proprietary aress condition of written consent,
Participants Signature: _			Date:		

Payment: Check Cash \$____