## **GYM HOURS**

#### **Training Sessions:**

MON-THURS 6:00pm session 7:30pm session

FRIDAY CLOSED

SATURDAY 9:00am session 10:30am session

SUNDAY 9:00am session

### Weight Room Hours:

**Mon-Thurs:** 6:00pm-9:00pm

Friday: CLOSED

Sat: 9:00am-12:00pm Sun: 9:00am-11:00am

<sup>\*</sup>Gym/Workout times subject to change. 24 hour notice will be given to those clients with <u>SCHEDULED SESSIONS</u>.

### **ATHLETE PROFILE**

# **PRINT**

			DATE:		
NAME:		n	RINT		
ADDRESS:					
	CITY			ZIP	
PHONE #:		SEC	ONDARY #:		
FATHER'S NA					
MOTHER'S NA	AME:				
AGE: H	IT:	WT:	_ GRADE:	,	
SCHOOL:					
SPORT TRAIN	ING FO	OR:			
EMAIL ADDR	ESS:				

# Xpress Sports Training

Waiver of Liability, Release, Assumption of Risk and Indemnifying Agreement

In exchange for good and valuable consideration received from Xpress Sports Training, the undersigned Participant and Participant's Parent/Legal Guardian (if applicable) hereby executes this Waiver of Liability, Release, Assumption of Risk and, Indemnification Agreement effective as of the date below.

Participant and Participant's Parent/Legal Guardian herby agree to waive any and all claims, whether in law, equity, or otherwise, against Xpress Sports Training, its owners and, operators of the premises used to conduct sports training services and activities. This shall include, but not limited to, any cause of action for personal injury, property damage, or wrongful death occurring to Participant which may arise out of any services provided by Xpress Sports Training through its employees or representatives. In addition, Participant and Participant's Parent/Legal Guardian agrees to indemnify and hold Xpress Sports Training harmless for any claims which may be brought on Participant's behalf by any third party, including Participant's heirs, administrators, representatives, or assigns.

Participants and Participant's Parent/Legal Guardian acknowledge that they have been provided and have read the above paragraphs and have not relied upon any statements or representations from Xpress Sports Training, and that they are fully advised of the potential dangers associated with the services provided by, and athletic training facilities utilized by, Xpress Sports Training. Participant and Participant's Parent/Legal Guardian represent that they have had the opportunity to have this Waiver of Liability, Release, Assumption of Risk, and Indemnification Agreement reviewed by an attorney.

Participant Name (print)	Date of Birth
Participant Signature	Date
Parent/Legal Guardian Name (print)	Date ·
Parent/Legal Guardian Signature	Date