



COUNTERBALANCE PARENTAL/GUARDIAN CONSENT FORM

Please print this page with all it's content, read it and ask you parents or guardians to sign it before your first visit to one of our gyms. Please bring a signed copy on your first visit. You will need to contact staff who will then enable your access to the gym.

I, _____ (The Guardian) give my consent for _____ (referred to as The Member) to join and use the facilities at the CounterBalance Conditioning Centre.

The member will be able to use the gym facilities at his/her will with my permission. To the best of my knowledge, the above-named child can fully participate in exercise. I am aware of risks and hazards connected with exercise and my child hereby elects to voluntarily participate in Exercise activities, knowing that the exercise and equipment may be dangerous to my child. I voluntarily assume full responsibility for any personal injury or death that may be sustained by my child or any loss or damage to property owned by me or my child, as a result of being engaged in exercise activities at CounterBalance Conditioning. In consideration of participation in a fitness activity, I agree, on behalf of the above-named child, his/her heirs and representative, to fully and forever release, CounterBalance Inc., its officers, volunteers, agents and employees from any and all liability, claims, demands, damages, actions, of causes of action, whatsoever arising out of an injury or death to the above-named child or myself, related to the activity, regardless of cause. I take full responsibility to ensure the above-named child will keep and obey all the CounterBalance gym rules stated throughout the gym and on membership form sign-up sheets. If these rules are not adhered to CounterBalance reserves the right to revoke this membership without refunding of fees paid. I have reviewed this Agreement and am aware of the risks involved in participating in the Exercise and the possible injuries that may occur. My child freely and voluntarily agrees to participate in the Exercise. In signing this release, I represent that I understand this Agreement and sign voluntarily as an act of my own free will.

The Member will be able to use the gym facilities at his/her will with my permission.

To the best of my knowledge, the above-named child can fully participate in the exercise. I am aware of risks and hazards connected with exercise and my child hereby elects to voluntarily participate in Exercise activities, knowing that the exercise and equipment may be dangerous to my child. I voluntarily assume full responsibility for any personal injury or death that may be sustained by my child or any loss or damage to property owned by me or my child, as a result of being engaged in exercise activities at CounterBalance.

In consideration of participation in a fitness activity, I agree, on behalf of the above-named child, his/her heirs and representative, to fully and forever release, CounterBalance, its officers, volunteers, agents and employees from any and all liability, claims, demands, damages, actions, of causes of action, whatsoever arising out of an injury or death to the above-named child or myself, related to the activity, regardless of cause.

I take full responsibility to ensure the above-named child will keep and obey all the CounterBalance gym rules stated on gym membership forms and state on signs throughout the gym. If these rules are not adhered to CounterBalance reserves the right to revoke this membership without refund of fees paid.

I have reviewed this Agreement and am aware of the risks involved in participating in the Exercise and the possible injuries that may occur. My child freely and voluntarily agrees to participate in the Exercise. In signing this release, I represent that I understand this Agreement and sign voluntarily as an act of my own free will.

Signature

Print Name

Date