

(MINOR CHILD)

Town of Seymour Fitness Center
20 Pine Street
Seymour, CT 06483

Acknowledgement and Assumption of Risks

I, _____, as parent and/or legal guardian of _____ understand that the Seymour Fitness Center provides the opportunity to use equipment, including strength training equipment, cardio equipment, free weights and stretching/abdominal equipment. I further affirm that I understand that the activities in which my child may engage as a Seymour Fitness Center member may be physically strenuous and involve the dangers inherent in participation in such activities.

I, the undersigned, am fully aware of the potential dangers inherent in participating in the Seymour Fitness Center. I accept full responsibility to verify with my child's physician that he/she has no physical or psychological problems that would prohibit his/her participation in the Fitness Center. I further certify that he/she has no physical weakness or defect that might endanger his/her health by participating in these activities. I hereby assume the risk of personal injury and/or damage to his/her personal property in undertaking these activities. In the event I cannot be reached and my child has sustained an injury, I consent to emergency treatment if required. The Town does not provide accident or hospitalization insurance for participants. All participants are advised to have adequate personal coverage.

I further understand and agree that my child will comply with all policies, rules and procedures regarding the use of the equipment and facilities that are a part of the Seymour Fitness Center.

I, for my child and on behalf of his/her heirs, assigns, personal representatives and next of kin, hereby release, indemnify, and hold harmless the Town of Seymour, its officers, officials, agents, students and/or employees ("Releasees") from any and all claims, demands, damages, rights of action or causes of actions, present or future, arising out of his/her use or occupancy of the Seymour Fitness Center or any fitness/wellness activity occurring therein, including any injuries arising from the negligence of the Releasees or otherwise, to the fullest extent permitted by law. I further state that my child is at least fifteen (15) years of age and I am fully competent to sign this document, and that I execute this release for full, adequate, and complete consideration fully intending to bind my child by the same.

I ACKNOWLEDGE THAT I HAVE THOROUGHLY READ THIS CONSENT AND FULLY UNDERSTAND THAT IT IS A RELEASE OF LIABILITY. BY SIGNING THIS DOCUMENT, I AM WAIVING ANY RIGHT MY CHILD, HIS/HER SUCCESSORS MIGHT HAVE TO BRING LEGAL ACTION OR ASSERT A CLAIM AGAINST THE TOWN OF SEYMOUR FOR ANY INJURY SUSTAINED.

Parent/Legal Guardian Name(please print): _____

Legal Guardian Signature: _____

Date: _____