PERSONAL TRAINING BY KAREN BASHA AT THE PORT HURON TENNIS HOUSE WAIVER AND REGISTRATION FORM

Please print or Type _____ PHONE:____ NAME: MAILING ADDRESS: E-MAIL ADDRESS: _AGE:____GENDER:___ DATE OF BIRTH: EMERGENCY CONTACT:_____ PHONE:____ PLEASE MAKE CHECKS PAYABLE TO KAREN BASHA. **Personal Training Program Policies** Each participant must sign a waiver and complete a health history questionnaire to be kept on file and will be confidential between the personal trainer and the client. Participants must notify Karen Basha 12 hours in advance for cancellations; if not the participant will be charged for the session. Assumption of Risk for Participation in the Personal Training Program Each participant in the Personal training program should realize that there are substantial risks, hazards, and danger inherent in such training. Each participant in the Personal Training Program must be covered by and accident and health insurance policy. It is the responsibility of each participant to participate only in those activities for which he/she has the prerequisite skills, qualifications, preparation, and training (as determined by the personal trainer). Karen Basha does not warrant or guarantee in any respect the physical condition or any equipment used in connection with the activity. Therefore, in consideration of the benefits received from the personal training program, the undersigned assumes all risks of damages or injury, including death that may be sustained by him/her while participating in an exercise activity or in travel to or from such activity. Release, Covenant Not to Sue, and Waiver Personal Training involves an inherent risk of physical injury and the undersigned assumes all

Personal Training involves an inherent risk of physical injury and the undersigned assumes all Such risks. The undersigned to participate in their Personal Training Program for which or in connection with which Karen Basha has made available any equipment, facilities, grounds, or personnel for such training, the undersigned does hereby release, covenant not to sue, and forever discharge Karen Basha and her officers, agents, and employees of any and for all claims, demands, rights, and causes of action of whatever kind or nature including but not limited to negligence, unforeseen bodily and personal injuries, damage to property, and the consequences thereof resulting from participation in any way connected with such recreational programs and activities. The undersigned understands that this release, Covenant Not to Sue, Waiver, and Assumption of Risk shall be effective from the date of signature until the effective termination of the personal training services by Karen Basha. By signing this document, the undersigned hereby acknowledges that he//she has read the above carefully before signing, and agrees to comply with all the above.

SIGNATURE:	DATE:	
SIGNATURE OF PARENT OR GUARDIAN - IF PARTICIPANT IS 18 YEARS OR YOUNGE		
PRINT NAME:	SIGNATURE	DATE
ADDRESS AND PHONE:		