

NAME \_\_\_\_\_ DATE \_\_\_\_\_ SEX M/F AGE \_\_\_\_\_  
ADDRESS \_\_\_\_\_ DOB \_\_\_\_\_ CITY HOME  
STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
PH# \_\_\_\_\_ CELL# \_\_\_\_\_ WORK # \_\_\_\_\_  
EMPLOYED BY \_\_\_\_\_ EMAIL \_\_\_\_\_

PRE-EXISTING CONDITIONS/INJURIES:

\_\_\_\_\_

DOCTOR \_\_\_\_\_ PHONE \_\_\_\_\_  
INSURANCE CO \_\_\_\_\_ POLICY # \_\_\_\_\_  
IN CASE OF EMERGENCY  
NOTIFY \_\_\_\_\_ PHONE \_\_\_\_\_

PLEASE TELL US HOW YOU FOUND OUT ABOUT *Shockoe Bottom CrossFit*?

WORD OF MOUTH ( ) WALK BY ( ) FLYER ( ) ADVERTISEMENT ( ) WEBSITE ( ) OTHER ( )

#### General Waiver

Please read carefully before signing assumption of risk, release of liability, and hold harmless agreement

I, the undersigned, acknowledge that I have voluntarily elected to participate in the disciplines and activities of Shockoe Bottom CrossFit, LLC training on behalf of myself or my Minor

I understand that the disciplines of CrossFit, Martial arts, yoga, Running, and training events on or off the premises of Shockoe Bottom CrossFit can be dangerous and involve risks of injury and death. I understand that the moves in Shockoe Bottom CrossFit's training programs, such as running, jumping, climbing, lifting, and other strenuous movements entail certain risks that are unpredictable. **The Risks of such movements involved in high intensity, high impact activities may include, among other things:** slips and falls; Falling from equipment; rope burns; pinches; scrapes; twists and jolts that could result in scratches, bruises, sprains, lacerations, fractures, concussions, broken bones; wrist, arm, and shoulder injuries; musculoskeletal injuries; injuries to internal organs; the negligence of other people; my own physical condition; and the risk of emotional and psychological injuries or physical damage associated with this activity. Traveling to and from events and training activities raises the possibility of any manner of transportation accidents

**I agree to cease activity immediately if I feel faint, lightheaded, weak, or in pain. I certify that I am in good physical condition and that I am aware of no physical impairments, illness, or injuries that prevent me from participating in any activities at or under the guidance of Shockoe Bottom CrossFit.** SBC training employees are highly skilled and professionally trained. They seek safety first above all else, but they are not infallible. They might be unaware of a participant's true fitness or capabilities. They might misjudge the weather, surfaces, environmental or any other pivotal condition. **It is ultimately up to me and not the instructors, to discontinue activity if I feel that the environment, a physical condition, the actions of myself or others, or any other reason, prohibits safe training.**

I understand and acknowledge that my participation in any activity at Shockoe Bottom CrossFit's facility at 121 N 18<sup>th</sup> st Richmond VA 23223 or any other location under the instruction of a SBC trainer may involve risk of serious injury or death resulting from actions, inactions, negligence of myself and others, the condition of facilities, equipment, or any type of accident from myself or others. **I warrant and promise that I assume full responsibility for my conduct and safety at all times even under the instruction of any SBCF coach.**

I understand and agree that neither Shockoe Bottom CrossFit, nor any of its owners, Directors, employees, or trainers may be held liable for any claims or causes of action, and I personally assume full responsibility for any risks or loss, property damage, stolen property or personal injury, including death, that may be sustained by me as a result of my participation in any activity At Shockoe Bottom CrossFit Facility or any other location under the instruction of a Shockoe Bottom CrossFit employee whether foreseeable or unforeseeable. **I agree to use my personal medical insurance as a primary medical coverage payment if accident or injury occurs.**

**I give full permission for myself, or, if I am signing on behalf of a minor child, for any person connected with Shockoe Bottom CrossFit to administer first aid deemed necessary.** If signing for a minor I agree that only my signature is needed for full liability release for my minor, any other legal guardians of the minor may not pursue costs associated with accident, injury or death to the minor. I agree to indemnify Shockoe Bottom CrossFit for any and all claims brought on my behalf or on behalf of the named minor by any person acting on myself or the minor's behalf; **I accept full responsibility for all medical expenses incurred by myself or my child in connection with Shockoe Bottom CrossFit or its facility.**

The **participant assumes full financial responsibility for any injury or death that the participant may cause either to him/herself or to any other participant due to his or her negligence.** Should the above mentioned parties, or anyone acting on their behalf, be required to incur attorney's fees and costs to enforce this agreement, I agree to reimburse them for such fees and costs. I further agree to indemnify and hold harmless Shockoe Bottom CrossFit from liability for the injury or death of any person(s) and damage to property that may result from my negligent or intentional act or omission while participating in activities offered by Shockoe Bottom CrossFit at their facility or any other location such as parks, trails, or other facilities. It is agreed that no representations, arrangements, or verbal deals except as herein typed shall be binding upon Shockoe Bottom CrossFit.

**I have read the foregoing assumption of risk, and release of liability, and by signing it I acknowledge that I fully understand its terms. I have signed it freely and voluntarily without any inducement, assurance, or guarantee being made to me. I understand that by signing this form I am waiving valuable legal rights, and intend my signature to be a complete and unconditional release of all liability to the greatest extent allowed by law.**

Consent

Agreed to Waiver

Consented to conduct electronic business

**Member Signature**