2510 San Mateo Place NE

Albuquerque, NM 87110

Phone: 505-563-0903

**Registration/Release Form**s

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City/State/Zip\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency contact Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How did you hear about us?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ First Class (Date/Time)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Waiver Clause/Hold Harmless Agreement

I\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(print student's name), the undersigned, hereby authorize the staff members at Bombshell Fitness/Jaymie Martinez and affiliates to act for me according to their best judgment in any emergency requiring medical attention, and I hereby waive and release Bombshell Fitness/Jaymie Martinez and their affiliates from any and all liability for any injuries or illnesses while going to and from and while at a Bombshell Fitness/Jaymie Martinez and/or affiliates class. All medical expenses incurred will be the responsibility of the student or the student's family. Bombshell Fitness strongly recommends that you consult with your physician before beginning this exercise or any exercise program. You should be in good physical condition and be able to participate in the exercise. Bombshell Fitness/Jaymie Martinez is not a licensed medical care provider and represents that it has no expertise in diagnosing, examining, or treating medical conditions of any kind, or in determining the effect of any specific exercise on a medical condition. You should understand that when participating in any exercise or exercise program, there is the possibility of physical injury. If you engage in this exercise or exercise, you agree that you do so at your own risk, are voluntarily participating in these activities, assume all risk of injury to yourself, and agree to release and discharge Bombshell Fitness/Jaymie Martinez and its affiliates from any and all claims or causes of action.

Bombshell Fitness/Jaymie Martinez and staff are not responsible for belongings left in the studio or event location.

I voluntary agree to assume all of the foregoing risks and accept sole responsibility for any injury to myself (including, but not limited to, personal injury, disability, and death), illness, damage, loss, claim, liability, or expense, of any kind, that I or anyone I am in direct contact with may experience or incur in connection with my attendance at Bombshell Fitness or participation in boot camp activities and/or events. On my behalf, I hereby release covenant not to sue, discharge, and hold harmless Bombshell Fitness, its employees, agents, and representatives, of and from the Claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto. I understand and agree that this release includes any claims based on the actions, omissions, or negligence of Bombshell Fitness, its employees, agents, and representatives whether a COVID-19 infection occurs before during, or after participation in any Bombshell Fitness program or event.

By signing my name below, I certify that I have read, understand and enter into this agreement freely and voluntarily.

Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

### COVID 19 GUIDELINES

Keeping our clients safe is as important as welcoming them back to our facility.

We will be following key safety principles, and building a culture of awareness to

keep our clients and staff fit and healthy. We have taken steps to implement safety guidelines, and keep a positive attitude about solving these challenges. Any restrictions in access, programming and distancing are stressful, and we want to spread positivity to welcome these changes.

### Increased Cleaning & Sanitation

Optimize and increased sanitation procedures. High-touch surfaces will be sanitized several times per day. Equipment should be sanitized after each session by clients and staff.

### Practice Safety and Sanitize Surfaces

Clients will follow safety policies, and signage will be posted to remind them. Hand sanitizer provided at the door, and sanitizing wipes for the equipment.

**Guidelines for Clients**

* Sanitize hands when arriving at the facility
* Masks required at all time (except when drinking water)
* Sanitize all equipment twice: before and after use
* 6-feet minimum distance between people including instructors (larger distance is preferred for people being active.)

**Use Online Training**

* Anyone feeling any symptoms should stay home
* High-risk populations should continue online training until risk levels are low (this consideration also applies to anyone sharing their household with high-risk populations)
* Anyone that has been in contact with a confirmed or suspected case of infection will not be allowed to attend in-person class and can continue online training until safe.

**PAR-Q**

This physical activity readiness questionnaire (PAR-Q) will help determine if

you’re ready to begin an exercise routine or program.

Has your doctor ever said that you have a heart condition or that you should participate in physical activity only as recommended by a doctor?

 Yes No

Do you feel pain in your chest during physical activity?

Yes No

In the past month, have you had chest pain when you were not doing physical activity?

Yes No

Do you lose your balance from dizziness? Do you ever lose consciousness?

Yes No

Do you have a bone or joint problem that could be made worse by a change in your physical activity?

Yes No

Is your doctor currently prescribing drugs for your blood pressure or a heart condition?

Yes No

Do you know of any reason you should not participate in physical activity?

Yes No

If you answered yes to one or more questions, if you are over 40 years of age and have recently been inactive, or if you are concerned about your health, consult a physician before taking a fitness test or substantially increasing your physical activity. If you answered no to each question, then it’s likely that you can safely begin exercising.

PRIOR TO EXERCISE

Prior to beginning any exercise program, including the activities depicted in this brochure, individuals should seek medical evaluation and clearance to engage in activity. Not all exercise programs are suitable for everyone, and some programs may result in injury. Activities should be carried out at a pace that is comfortable for the user. Users should discontinue participation in any exercise activity that causes pain or discomfort. In such event, medical consultation should be immediately obtained.