



## Senior Fit and Flexible Class

Participant's Name \_\_\_\_\_

Birthdate \_\_\_\_\_ Male \_\_\_ Female \_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Please list name of who we may contact in case of emergency:

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

Special Medical/Medication Conditions \_\_\_\_\_

Insurance Information / Group Name \_\_\_\_\_

Policy Holder \_\_\_\_\_

### **Senior Fit and Flexible Class**

**Time:**

**Monday 10:00 am-11:00 am**

**For more information:**

**Carpenter Center, 116 Terry Blvd**

**Gering, NE 69341**

**Phone: 308-635-8422**

**E-mail: info@carpentercenter.us**

**www.carpentercenter.net**

## PHOTO & LIABILITY WAIVERS

### WAIVER OF LIABILITY

In Consideration of participation in Senior Fit & Flexible, I represent that I understand the nature of this Activity and that I am qualified, in good health, and in proper physical condition to participate in such Activity. I acknowledge that if I believe conditions are unsafe, I will immediately discontinue participation in the Activity. I fully understand that this Activity involves risks of serious bodily injury, including permanent disability, paralysis and death, which may be caused by my own actions, or inactions, those of others participation in the event, the conditions in which the event takes place, or the negligence of the "releases" named below. I fully accept and assume all such risks and all responsibility for losses, cost, and damages I incur as a result of my participation in the Activity. I hereby release, discharge, and covenant not to sue The Carpenter Center or Senior Fit & Flexible, its respective administrators, directors, agents, officers, volunteers, employees, other participants, sponsors, advertisers and, if applicable, owners and lessors of premises on which the Activity takes place (each considered one of the RELEASEES herein), from all liability, claims, demands, losses, or damages on my account caused in whole or in part by the negligence of the "releases" or otherwise, including negligent rescue operations and future agree that if, despite this release, waiver of liability, and assumption of risk I, or anyone on my behalf, makes a claim against any of the Releases, I will indemnify, save, and hold harmless each of the Releases from any loss, liability, damage, or cost, which any may incur as the result of such claim.

***Any and all Senior Fit & Flexible activities will be conducted in a safe environment and will hold The Carpenter Center and Senior Fit & Flexible harmless of any injuries incurred in and outside these areas.***

I have read the Release and Waiver of Liability, Assumption of Risk, and Indemnity Agreement, understand that I have given up substantial rights by signing it and have signed it freely and without any inducement or assurance of any nature and intend it to be a complete and unconditional release of all liability to the greatest extent allowed by law and agree that if any portion of this agreement is held to be invalid the balance, notwithstanding, shall continue in full force and effect.

Signature \_\_\_\_\_

Date \_\_\_\_\_

### PHOTO RELEASE WAIVER

I hereby authorize The Carpenter Center and Senior Fit & Flexible to publish the photographs and videos taken of me for use in the printed publications, website and training purposes. I release The Carpenter Center and Senior Fit & Flexible from any expectation of confidentiality for myself. I acknowledge that since participation in publications and websites produced by The Carpenter Center and Senior Fit & Flexible is voluntary, I will not receive financial compensation. I further agree that participation in any publication and website produced by The Carpenter Center and Senior Fit & Flexible confers no rights of ownership whatsoever. I release The Carpenter Center and Senior Fit & Flexible, its contractors and its employees from liability for any claims by me or any third party in connection with my participation.

Signature \_\_\_\_\_

Date \_\_\_\_\_

#### Payment:

Cash \_\_\_\_\_ Check # \_\_\_\_\_ CC \_\_\_\_\_

Received by \_\_\_\_\_

Prorated for month of \_\_\_\_\_ Amt \$ \_\_\_\_\_

Refunds— There are no refunds, credits, or prorating of fees for missed days, holidays, class withdrawal, or dismissal.

**Classes MUST BE PAID  
on date of attendance along with the  
completed application.**