



WARRIOR TRAINING

Wednesdays 5:00 PM – 6:00 PM

Participant Name _____

Date of Birth _____ Age _____ Grade _____

Parent(s)/Guardian(s) Name _____

Phone # _____ Email _____

Address _____ City _____ State _____ Zip _____

In case of an emergency... Besides information provided above, please list additional contact (1) information for second (2) contact to be notified:

Name: _____ Relationship: _____

Medical Conditions – Medications _____

Food Allergy _____

Medical Insurance/Group Information _____

Policy Holder/Number _____



(see back page for waiver)

Cost/Fee

The class cost is **\$40 per month.**

There will be NO refunds, credits, or prorating fees for missed days, including holidays, withdrawals, or dismissals.

Fees MUST BE PAID at registration/enrollment with completed application.

There will be an additional charge of \$30 for NSF checks.

Office Use Only

Registration received by _____

Date received _____

Cash/Check #/Credit Card _____

Carpenter Center – 116 Terry Blvd. Gering, NE 69341

308-635-8422 – programs@carpentercenter.us



(see next page for waiver)

Waiver

Participation in physical activities involves certain risks, strains, exhaustion, joint injury, etc. The Carpenter Center will NOT be liable for lost or stolen items while program participants are using the facilities. I give permission for the Carpenter Center, without obligation, to use any photographs, video footage, recordings, voice recordings, etc. which may include my voice/image, or that of my child(ren) for the purposes of promotion. I, the undersigned, for myself and my heirs, do hereby release the Carpenter Center/Housing Authority of Western Nebraska/City of Terrytown and its employees, agents, volunteers, and coaches from any and all claims for injury, death, loss, or damage I/my child(ren) may suffer as a result of participation. In Consideration of participation in Agility Training, 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 “releasees” 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 Agility Training, 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 “releasees” or otherwise, including negligent rescue operations and 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 “releasees,” I will indemnify, save, and hold harmless each of the “releasees” from any loss, liability, damage, or cost, which any may incur as the result of such claim. Agility Training will be conducted in a safe gym environment and will hold The Carpenter Center harmless of any injuries incurred in and outside gym areas. I have read the Release and Waiver of Liability, Assumption of Risk, and Indemnity Agreement, and 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.

Parent/Guardian Signature

Date
