



## MINOR LIABILITY WAIVER

I, \_\_\_\_\_ (printed name of parent/legal guardian)  
consent to the following for \_\_\_\_\_ (printed name of  
minor child):

My child is voluntarily participating in an exercise class, cardio-training, strength-training or personal training program at Rise RX Fitness. I recognize that the programs/classes require physical exertion that may be strenuous at times and may cause physical injury and I am fully aware of the risks and hazards involved.

I understand that it is my responsibility to consult with a physician prior to and regarding my child's participation in Rise RX's Fitness programs, classes or use of equipment. I represent and warrant that my child has no medical condition that would prevent his/her participation..

I agree to assume full responsibility for any risks, injuries or damage known or unknown which my child may incur as a result of participating in said programs, classes or use of equipment. Such injuries may include, but are not limited to, heart attacks, muscle strains, muscle pulls, muscle tears, broken bones, shin splints, heat prostration, injuries to knees, injuries to back, injuries to foot, or any other illness or soreness, including death.

I knowingly and voluntarily and expressly waive any claim I may have against Rise RX Fitness or any instructor, employee, officers, owners, personal trainer or volunteer of Rise RX Fitness for injury or damages that my child may sustain as a result of participating in the programs, classes or by use of equipment.

My child has permission to have a membership at Rise RX Fitness. I am aware and understand the risks involved in my child having a membership at Rise RX Fitness.

I have read the above waiver and release of liability and fully understand its contents. I voluntarily agree to the terms and conditions stated above.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/ Guardian Name (Print): \_\_\_\_\_

Minor Name (Print): \_\_\_\_\_ DOB: \_\_\_\_\_

Minor Member Signature: \_\_\_\_\_ Date: \_\_\_\_\_

After completion of this form, Minor Liability Waiver, return to the service desk or email to [hello@riserxfitness.com](mailto:hello@riserxfitness.com).

**Your child may not use the facility until this form has been completed.**