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<p><u>OFFICE USE ONLY</u> Date of First Visit _____ Session Type: private / small / team Payment: comp / card / check / cash Entered to EZ (initials) _____</p>
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EXERCISE RELEASE FORM - YOUTH

Please Print Clearly

Parents must complete the following exercise release form before your child may begin his or her exercise program.

Child's Full Name _____ Age _____ DOB ____ / ____ / ____

Child's Home Phone _____ (Circle One) Male / Female

Child's Address _____
Street City State Zip

****List any medical conditions that your child's coach should be made aware of:**

Parents' Full Names _____

Parents' Cell Phone Numbers _____

Parents' Email Address _____

How did you hear about Sterling's Team Speed? _____

WAIVER AND RELEASE OF LIABILITY

Sterling's Team Speed urges you and all guests to obtain a physical examination from a doctor before using any exercise equipment or participating in any exercise class. All exercises, including the use of weights and use of any and all machinery, equipment, and apparatus designed for exercising shall be at the guest's sole risk. I certify that my child is in good physical condition and have no known disabilities that might otherwise be detrimental to my child's health or well-being.

I understand that the agreement to use, or selection of exercise programs, methods and types of equipment shall be my entire responsibility, and Team Speed, LLC shall not be liable to guest for any claims, demands, injuries, damages, or actions arising due to injury to my child or my person or property arising out of or in connection with the use by guest of the services, facilities, and premises of Team Speed, LLC. I hereby holds Team Speed, LLC, its officers, owners, agents, employees and partners harmless from all claims which may be brought against them by member or on member's behalf for any such injuries or claims. I confirm that all of the information provided on this application is correct and true.

Sterling's Team Speed does not offer refunds under any circumstances. They do offer credit to be applied toward another training service of your choice. They reserve the right to adjust training times and days if necessary. I understand that I am purchasing sessions for training at Sterling's Team Speed. If my coach/trainer is unavailable or no longer employed with Team Speed, I will be assigned another coach/trainer to continue my training with. All purchases are non-refundable.

Media Release: I give Sterling's Team Speed permission to use pictures and video production of my son and daughter when participating in training sessions. Pictures may be placed in marketing material and on the website for the sole purpose of advertising athletic training.

Cancellation Policy: To avoid being charged for a private session, clients must provide **24-hour advance** notice when cancelling. **Groups and Teams** must provide **48-hour advance** notice when cancelling.

All participants must sign. Parental or guardian signature is required if applicant is under 18.

Parent/Guardian Signature: _____ Date: ____ / ____ / ____