



Agreement of Release and Waiver of Liability
PARTICIPATION AGREEMENT
Emergency Contact Information

Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_-\_\_\_\_  Mobile |  Home

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_

Email: \_\_\_\_\_ Would you like to receive email updates:  Yes |  No

I \_\_\_\_\_ (print name) understand that Pure Cycle, LLC classes and programs include physical movements as well as an opportunity for relaxation, stress reduction and relief of muscular tension. As is the case with any physical activity, the risk of injury, even serious or disabling, is always present and cannot be entirely eliminated. It is my responsibility to consult with a physician prior to my participation in the classes or programs of Pure Cycle, LLC.

I represent and warrant that I am physically fit and I have no medical condition that would prevent my full participation in the programs. I agree to take sole, exclusive and full responsibility for any risks, loss, claim, injury, damage or liability, known or unknown, which I might incur as a result of participating in the program.

I knowingly, voluntarily, and expressly agree to accept full responsibility and assume the risk for my participation in any and all classes and programs offered by Pure Cycle, LLC. I shall do so at my own risk, and hold Pure Cycle, LLC, its Owners, employees, representatives and agents, forever harmless from any and all loss, claim, injury, damage, or liability sustained or incurred by me. I specifically agree to hold harmless Pure Cycle, LLC as to any loss, cost, claims, injury, damage or liability sustained or incurred by any participating in the classes, or through my use of the facilities or equipment of Pure Cycle, LLC which is caused by an act or omission, whether negligent, intentional or otherwise, of an employee, representative, or agent of Pure Cycle, LLC.

I, on behalf of myself and my heirs, or legal representatives forever and irrevocably release waive, discharge and covenant not to sue Pure Cycle, LLC for any injury or death caused by my participation in the programs. My signature below constitutes my full acceptance of this waiver.

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

Signature of Participant \_\_\_\_\_ Date: \_\_\_\_\_

If Participant is Under 18:

As legal guardian of \_\_\_\_\_, I consent to the above listed terms and conditions.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Emergency Contact Information

Name \_\_\_\_\_

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

How did you hear about us?  Market Magazine  Online Search  TV  Radio  Store Front  Friend - Friend's Name: \_\_\_\_\_

In consideration of my participation in classes and programs offered by Pure Cycle, LLC, I acknowledge and agree to the following:

- 1. I shall fully comply with all of the policies, procedures, programs and regulations established by Pure Cycle from time to time.
2. My participation is entirely subject to the approval of Pure Cycle, and Pure Cycle shall have the right to suspend, terminate or prohibit my participation at any time for any reason.
3. I certify that I have received a copy of the Rules and Regulations of Pure Cycle, LLC.

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_

FOR OFFICE USE ONLY:
 Entered into Database
Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Int: \_\_\_\_\_