Waiver, Release, and Assumption of Risk Form

This form is an important legal document. It explains the risks you are assuming by participation in an exercise program. It is important that you read and understand it completely. After you have done so, please print your name legibly and sign in the spaces provided at the bottom.

Waiver, Informed Consent, and Covenant Not to Sue

I,_____, have volunteered to participate in a physical competition under the direction of National Strength and Conditioning Association (NSCA), which will include, but may not be limited to, weight and/or resistance training. In consideration of the NSCA's agreement to instruct, assist, and train me, I do here and forever release and discharge and hereby hold harmless the NSCA, and their respective agents, heirs, assigns, contractors, and employees from any and all claims, demands, damages, rights of action or causes of action, present or future, arising out of or connected with my participation in this or any exercise program including any injuries resulting there from. THIS WAIVER AND RELEASE OF LIABILITY INCLUDES, WITHOUT LIMITATION, INJURIES WHICH MAY OCCUR AS A RESULT OF (1) EQUIPMENT THAT MAY MALFUNCTION OR BREAK (2) ANY SLIP, FALL, DROPPING OF EQUIPMENT AND (3) OUR NEGLIGENT INSTRUCTION OR SUPERVISION.

Assumption of Risk

I,_____, recognize that exercise might be difficult and strenuous and that there could be dangers inherent in exercise for some individuals. I acknowledge that the possibility of certain unusual physical changes during exercise does exist. These changes include abnormal blood pressure; fainting; disorders in heartbeat; heart attack; and, in rare instances, death.

I understand that as a result of my participation, I could suffer an injury or physical disorder that could result in my becoming partially or totally disabled and incapable of performing any gainful employment or having a normal social life.

I recognize that an examination by my physician must be obtained prior to involvement in this exercise program.

I acknowledge and agree that I assume the risks associated with any and all activities and/or exercises in which I participate.

I ACKNOWLEDGE THAT I HAVE THOROUGHLY READ THIS WAIVER AND RELEASE AND FULLY UNDERSTAND THAT IT IS A RELEASE OF LIABILITY. BY SIGNING THIS DOCUMENT, I AM WAIVING ANY RIGHT I OR MY SUCCESSORS MIGHT HAVE TO BRING A LEGAL ACTION OR ASSERT A CLAIM AGAINST the NSCA, or OTHERS REFERRED TO IN THIS DOCUMENT FOR ANY NEGLIGENCE OR THAT OF OUR EMPLOYEES, AGENTS, OR CONTRACTORS.

Photography and Audio/Video Recording

I hereby give the NSCA and NSCA's official professional recording company permission to video tape, photograph, and record my image and or likeness. I understand that such taping or recording may be used at the sole discretion of the NSCA. I also understand by giving permission is in no way an endorsement of the NSCA or any product(s) distributed by the NSCA.

_____ _____

Participant's signature (parent/guardian if under 18) Date

_____

Please print name