



WAIVER OF LIABILITY

5 Browns Lane
Hawthorne, NY 10532
914-592-3737
www.solarisclubs.com

Participant's Name: _____

D.O.B.: _____ Age: _____ Sex: M / F E-mail: _____

Parent/Guardian Name(s): _____

Street Address: _____

City: _____ State: _____ Zip: _____

Home Phone #: _____ Cell Phone #: _____

In case of emergency, call: _____ Phone #: _____

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Program Name: _____ Day: _____ Time: _____

Rental Day: _____ Time: _____ Coach: _____

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Waiver and Medical Release –MUST BE SIGNED UPON REGISTRATION

I hereby warrant and represent that I have no disability, impairment, or ailment preventing me from engaging in active or passive exercise or activity that will be detrimental to my health, safety, or physical condition if I so engage or participate. This representation is made by the undersigned knowing that SOLARIS SPORTS CLUBS (the "Club") will rely on the same. The undersigned hereby acknowledges that in using the facilities, programs and equipment of the Club I do so entirely at my own risk. In consideration of my ability to use the Club's facilities and equipment I expressly agree that the Club shall not be liable for any personal injuries or any loss or damage to property sustained on or about the Club premises resulting from or arising out of the acts or omissions of the Club and/or its staff, or the acts or omissions of any other person on the premises of the Club and I assume full responsibility for same. I affirm that there are inherent risks in all health and fitness club activities that I am aware of and understand these risks and I assume all responsibility for personal injury and/or loss from these injuries.

I understand that the participant may be photographed during a program and that the photo may be used for promotional materials.

I further agree to release from liability and to indemnify and hold harmless the Club for any and all claims arising as a result of my engaging in Club activities or any activities incidental thereto, wherever, whenever, or however the same may occur.

I affirm that I am of legal age and am freely signing this agreement, or that I am the parent or legal guardian of the minor for whom I am giving up legal rights and/or remedies which may be available due to the acts or omissions of the Club and/or its staff.

Signature of Participant Date

Signature of Parent if Participant Date
is under 18