



# FREE TRIAL CONSENT

800 Anneberg Circle 539-7529 wildcatcreekfun.com

Thank you for checking out our website and requesting a 10 day free pass to our fitness center. Please fill out the form below and bring it by to start your family's free trial. You will find that our facility is the cleanest, friendliest, and **BEST VALUE IN TOWN.**

(Good for 10 consecutive days. **Gym use only.** Includes entire family that is at least 14 years of age)

LAST FIRST Member #

ADDRESS

CITY STATE ZIP

PHONE (H) (W) (C)

DOB AGE GENDER

Spouse  
Birthday \_\_\_/\_\_\_/\_\_\_ Age \_\_\_  
 Male  Female  
# \_\_\_\_\_

Children/Dependent  
Birthday \_\_\_/\_\_\_/\_\_\_ Age \_\_\_  
 Male  Female  
# \_\_\_\_\_

Children/Dependent  
Birthday \_\_\_/\_\_\_/\_\_\_ Age \_\_\_  
 Male  Female  
# \_\_\_\_\_

Children/Dependent  
Birthday \_\_\_/\_\_\_/\_\_\_ Age \_\_\_  
 Male  Female  
# \_\_\_\_\_

## GENERAL CONSENT

I, as a guest of Wildcat Creek Fun and Fitness (WCFF), understand that it is my responsibility to practice safe exercise, stay within my target heart rate and include with each session a warm-up and cool-down. It is also my responsibility to inform the fitness staff if there are changes in my health or medications. I understand that WCFF recommends that I obtain a complete examination from my doctor before participation in physical activities to determine precautions or contraindications to exercise; this is due to certain risk factors or existing and/or potential medical problems that I have or may have. I wish to waive this right and exercise at my own risk, holding neither WCFF and its employees.

I understand that all physically strenuous activities are potentially dangerous, and serious and sometimes fatal injuries occur when engaging in the available activities offered at WCFF. I specifically assume any and all risks of injury. I hereby waive, release and discharge any and all claims that may have or may subsequently acquire against WCFF, its directors, officers, agents, employees, personal trainers, or instructors. This release and waiver is intended to discharge, in advance, any and all potential liability arising out of or connected in any way with membership and participation at WCFF. It is further understood that my waiver, release, and assumption of risk is to be binded in my heirs and assigns. I agree to hold WCFF, its agents and employees harmless from any claims, demands, or causes of action which are in any way connected with my participation in the activities of WCFF or the use of the facilities and equipment of WCFF. I shall indemnify against any such claims, demands, or causes of action. Should WCFF or anyone acting on its behalf be required to incur attorney's fees and costs to enforce this agreement, I agree to indemnify and hold WCFF harmless for such fees and costs and will be expected to pay any unpaid fees.

Guest \_\_\_\_\_

Date \_\_\_\_\_

Staff \_\_\_\_\_

### For staff only:

Pass start date: \_\_\_\_\_ Pass end date: \_\_\_\_\_

Initial when entered into computer: \_\_\_\_\_