

## Guest Registration Waiver

YOUTH FITNESS + SPORTS PERFORMANCE	Today's Date: am / pm
Parent/Guardian 1 Profile	Parent/Guardian 2 Profile
First Name:	First Name:
Last Name:	Last Name:
Mobile Phone:	Mobile Phone:
Email:	Email:
Employer:	Employer:
How did you hear about YES! Fitness?	Is this your first visit?YESNO-last visit
1st Youth's Name:	Date of Birth:
Sports or Activities:	
2nd Youth's Name:	_Date of Birth:
Sports or Activities:	
3rd Youth's Name:	Date of Birth:
Sports or Activities:	
- additional youths can be listed on back	
Emergency Contact:	Relationship:
Phone #:	
Physician:	Phone # :
TheuseofthefacilitiesatYES!Fitness(YES!)naturallyinvolvestheriskofinjurytoyouor voluntarilyaccept thisriskandagreethat YES!Will not beliableforanyinjury, damagetoyou,yourspouse,guests,unbornchildorrelativesresultingfromnegligenceor thereisanyclaimbyanyo nebasedonanyinjury,lossordamagedescribedherewhichir expensesrelatingtotheclaimand2)indemnifyYES!Forallliabilitiestoyou,yourspouse, understandandacknowledgethatYESdoesnotmanufactureanyofthefitnessorotherequal Assuch,youunderstandandacknowledgeYESisprovidingrec reationservices and physical conditionand have no medical impairment that might preventyou from your interadvice beforeyoujoined and cannot giveyouanyafteryoujoin, relating to you concern snoworafteryoujoin, discuss the mwithyour doctor before using the facilities binding arbitration under the rules of and before the American Arbitration Association and the rules of and before the American Arbitration Association and the rules of and before the American Arbitration Association and the rules of and the rules of an arbitration Association and the rules of a rule of the rules of	including, without limitation, personal, bodilyormentalinjury, economiclossorany otheractsofYES!Oranyoneon YES!' behalfofanyoneusingthefacilities.If nvolvesyou, youagreetol) defendYES!AgainstsuchclaimsandpayYES!Forall guests, unbornchild, relatives, oranyoneelseresultingfromsuchclaims. You hipmentatitsfacilities, butpurchasesand/orleasesequipmentfromthirdparties. dmaynotbeheldliablefordefectiveproducts, Further, yourepresentthatyouareingood ndeduseofYES. Assuch, youacknowledgethatYESdidnotgiveyoumedical rphysical conditionandabilitytousethefacilities. Ifyouhaveanyhealthormedical es. Ifthereis anydisputebetweenyouandYES!, bothpartiesagreetosubmititto ditsofficenearesttheclubyouused. Thedisputecoversanyaspectrelatedtoyour gations, facilities, representations, proper-tydamage, andinjuries. Arbitrationmeanthat
1 Signature:	I do not wish to receive information from YES! in the future.  Date:
2 Signature:	Date:
	ir Coaches will be with you momentarily.
OFFICE USE ONLY:Entered on MGTL	Entered in MBScannedUploaded
Walk-In Appointment with	Toured by: