

Human Billboard Elite Agreement

First Name _____ Last Name _____

Date ___ / ___ / ___ (Cell) Phone Number _____

Email _____

Date-Of-Birth Month _____ Day _____ Year _____ Occupation _____

Yes, I am ready for 6 months of unlimited boot camp workouts at a rate of \$49 per month in exchange for giving my best effort to refer at least one boot camp client per month.

Payment amount due \$294 (6 months of unlimited boot camp workouts for \$49 per month)
Payment method – Please (Circle one) Cash, check, Credit Card

Credit card number _____ CVC 3 digit code _____

Credit card type _____ Expiration Date _____ Name on card _____

Signature _____ Date _____

Human Billboard Elite Terms And Conditions

1. You promise to have a **positive attitude and work your butt** off each workout!
2. You are not a past or current member of (City) Fit Body Boot Camp!
3. You will not tell ANYONE that you are training at drastically discounted rate!
4. You promise to sincerely try to **refer me at least 1 boot camp client per month**

I promise to abide by the Human Billboard Elite terms and conditions

(Initial here) _____

(Your Company Here) MEMBER / PARTICIPANT ACKNOWLEDGMENT AND ASSUMPTION OF RISK AND FULL RELEASE FROM LIABILITY OF (Your Company Here), OR IT'S EMPLOYEES, CONTRACTORS, OFICERS, OR OWNER/S... PARTICIPANT ACKNOWLEDGES THESE PHYSICAL ACTIVITIES INVOLVES THE INHERENT RISK OF PHYSICAL INJURIES OR OTHER DAMAGES, INCLUDING, BUT NOT LIMITED TO, HEART ATTACKS, MUSCLE STRAINS, PULLS OR TEARS, BROKEN BONES, SHIN SPLINTS, HEART PROSTRATION, KNEE/LOWER BACK/FOOT INJURIES AND ANY OTHER ILLNESS, SORENESS, OR INJURY HOWEVER CAUSED, OCCURRING DURING OR AFTER PARTICIPANT PARTICIPATION IN THE PHYSICAL ACTIVITIES. MEMBER FURTHER ACKNOWLEDGES THAT SUCH RISKS INCLUDE, BUT AR NOT LIMITED TO, INJURIES CAUSED BY THE NEGLIGENCE OF AN INSTRUCTOR OR OTHER PERSON, DEFECTIVE OR IMPROPERLY USED EQUIPMENT, OVER-EXERTION OF A MEMBER, SLIP AND FALL BY MEMBER, OR AN UNKNOWN HEALTH PROBLEM OF MEMBER. MEMBER AGREES TO ASSUME ALL RISK AND RESPONSIBILITY INVOLVED WITH PARTICIPATION IN THE PHYSICAL ACTIVITIES, MEMBER AFFIRMS THAT MEMBER IS IN GOOD PHYSICAL CONDITION AND DOES NOT SUFFER FROM ANY DISABILITY THAT WOULD PREVENT OR LIMIT PARTICIPATION IN THE PHYSICAL ACTIVITIES. MEMBER ACKNOWLEDGES PARTICIPATION WILL BE PHYSICALLY AND MENTALLY CHALLENGING, AND MEMBER AGREES THAT IT IS THE RESPONSIBILITY OF MEMBER TO SEEK COMPETENT MEDICAL OR OTHER PROFESSIONAL ADVICE, REGARDING ANY CONCERNS OR QUESTIONS INVOLVED WITH THE ABILITY OF PARTICIPANT TO TAKE PART IN ACTIVITIES. BY SIGNING AT THE BOTTOM OF THIS PAGE, MEMBER/PARTICIPANT ASSERTS THAT HE OR SHE IS CAPABLE OF PARTICIPATING IN THE PHYSICAL ACTIVITIES. MEMBER AGREES TO ASSUME ALL RISK AND RESPONSIBILITY FOR NOT EXCEEDING HIS OR HER PHYSICAL LIMITS. PARTICIPANT UNDERSTANDS PHOTOS OR VIDEO MAY BE TAKEN DURING THE COURSE OF MY INVOLVEMENT IN BOOT CAMP, WHICH MAY BE USED FOR PROMOTIONAL PURPOSES

Member Signature _____ Date _____ / _____ / _____