

# Nevada County Get moving 2017

## GET MOVING 2017 COMMUNITY TRAINING – CONSENT & RELEASE



# Trkač

**PLEASE NOTE: Complete this form and sign, then bring it with you to the first night you attend Community Training. First night of training is Monday, April 3rd, 6:00pm. One form per person.**

Today's Date: \_\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_  Male  Female

Address: \_\_\_\_\_  
Street City State Zip

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_  
Name Relation Phone

**Be sure to check with your health care provider before starting a running/walking program.**

### CONSENT & RELEASE:

**Waiver:** In consideration of being permitted to participate in Trkac & Sierra TrailBlazers' Community Training Program, I, for myself, my heirs, personal representatives and assigns, do hereby release, waive, covenant not to sue and discharge Trkac & Sierra TrailBlazers' Community Training Program from liability and from all claims including the negligence of Trkac & Sierra TrailBlazers' Community Training Program resulting in personal injury, accidents or illnesses (including death), and property loss arising from, but not limited to, participation in Trkac & Sierra TrailBlazers' Community Training Program.

**Assumption of Risks:** I understand that participation in walking/running and conditioning programs carries with it certain inherent risks that cannot be eliminated regardless of the care taken to avoid injuries. I know that running is a potentially hazardous activity and certify that I am in good health and physically fit to enter into a training program. I acknowledge that I am aware of the many risks of injury and/or other conditions involved in athletic training in general, and walking/running training specifically, including conditions or injuries which could be life threatening. I have read the previous paragraphs and I know, understand, and appreciated these and other risks that are inherent in training for and participating in road, trail and track running and racing and any conditioning and cross training activities associated with that training. I hereby assert that my participation is voluntary and that I knowingly assume all such risks.

**Indemnification and Hold Harmless:** I also agree to INDEMNIFY AND HOLD HARMLESS the Trkac & Sierra TrailBlazers' Community Training Program from any and all claims, actions, suits, procedures, costs, expenses, damages and liabilities, including attorney's fees brought as a result of my involvement in the Trkac & Sierra TrailBlazers' Community Training Program.

**Severability:** I, the undersigned further expressly agree that the foregoing waiver and assumptions of risks agreement is intended to be as broad and inclusive as is permitted by the law of the State of California and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

Date: \_\_\_\_\_ Name of Applicant: \_\_\_\_\_

Signature: \_\_\_\_\_

Signature of Parent or Guardian if Under 18: \_\_\_\_\_