

Dynamic Fit Kids
General Registration Form

Child's Name: _____ Date of Birth: _____ Age: _____ Gender: _____

Address: _____ City: _____ State/Zip: _____

Parent(s)/Guardian Name(s): _____

Relation: _____ Phone: _____

Email Address: _____ Cell: _____

Emergency Contact Name: _____ Phone: _____

Physical Activity

What is your child's current activity level? _____

Does your child participate in team sports? If yes, which ones? _____

General Health

Has your child suffered from any broken bones? _____ If yes, which ones? _____ Date of Occurrence? _____ Status of Recovery? _____

Has your child suffered from any head trauma? _____ If yes, date of occurrence? _____ Status of Recovery? _____

Other injuries? _____ if yes, date of occurrence? _____ Status of Recovery? _____

Has your child been diagnosed with any of the following: Heart condition, Allergies, Asthma, ADHD, Other conditions? _____

Do you know any reason why your child should not participate in physical activity? _____

Does your child need a rescue inhaler? _____

If your child's health status changes please let us know.

Dynamic Fit Kids Policies and Liability Release

Dynamic Fit Kids is a unique fitness program designed for kids of all ages and fitness levels. Providing a healthy lifestyle for our children now is essential for their well-being later. Whether your child plays athletics or not, it is imperative they learn the proper way to push, pull, run, throw, climb, lift, and jump both effectively and safely.

Dynamic Fit Kids Exercise program:

- All forms must be filled out and signed prior to the start of the first session. Please bring all forms with you on the first day.
- Attire: Wear comfortable tennis shoes. No flip flops allowed. Appropriate workout attire is needed. You must bring a water bottle with you to every session in order to maintain hydration. If possible please bring an exercise mat.
- Training sessions will begin promptly at the time specified. Payment must be made prior to participating in exercise program. Your membership is not guaranteed until payment is received. Cash or Check payments may be accepted.
- Reimbursement or credits: Dynamic Fit Kids, Scott Anderson, does not offer refunds or credits, so please be sure that our services will match your needs before committing through payment. If any medical conditions or injury becomes present during the session it is up to the discretion of the Dynamic Fit Kids to reimburse, on a prorated amount, any unused training days. If in the event a class must be canceled, you will be given sufficient notice.
- Injury: You are fully responsible for any injury you incur before, during, or after workouts. The trainer will not be held accountable in any manner, legal or otherwise. Any injury incurred before, during, or after workout sessions is solely the responsibility of the client. Focusing during your workout and following directions will help prevent any injury. It's the client's responsibility to communicate any symptoms or discomfort during the session.
- No verbal agreement can alter or change the conditions of this agreement in any part.

Release, Covenant Not to Sue, and Waiver

I, _____, the parent or legal guardian of _____, authorize my child to participate in the Dynamic Fit Kids exercise program that will include strength, resistance, agility, endurance /or cardiovascular exercise. I have been informed and understand that physical exercise has been associated with certain risks, including but not limited to musculoskeletal injury, spinal injuries, abnormal blood pressure responses, and, in rare instances, heart attack or death. Every effort will be made to minimize these risks. Any information that is obtained regarding my child's fitness level and progress will be treated as privileged and confidential and will not be released or revealed to any person other than my physician without my expressed written consent. I have read and understand the foregoing consent to participation in said program. I am aware that my child may discontinue participation in the program at any time that I see fit to do so. If at any time I have questions concerning the content, policies, or procedures regarding the training program I will discuss these questions with Scott Anderson.

In addition, I agree, on behalf of my child, to the following:

- a) Assume all risk of injury and all risk of damage to or loss of property arising out of my participation in this program.
- b) Release, discharge, and waive any and all responsibility from Dynamic Fit Kids, Scott Anderson, and those individuals affiliated as trainers or staff of the camp from and against any liability of injury, including death, and for damage to or loss of property which may be suffered by the undersigned arising out of, or in any way connected with the participation in this program.
- c) Indemnify and hold Dynamic Fit Kids, Scott Anderson, and those individuals affiliated such as trainers or staff from and against all liability, claims, demands, actions, loss, and damage arising out of my participation in said group training program.

By signing this document, the undersigned hereby acknowledges that he/she has read the above carefully before signing, and agrees to comply with all the above.

Signature: _____

Print Name: _____

Date: _____

Signature of Parent/Guardian – one signature required if participant is 18 years old or younger:

Signature: _____

Print Name: _____

Date: _____