



## STUDENT - ATHLETE LIABILITY WAIVER FORM

2019 Legerity Sports Performance (LSP)  
Speed, Movement and/or Power Class Disclaimer, Assumption of Risk and waiver of Liability

**NOTE: Please make checks payable to "Legerity Sports Performance, Inc."**

Athlete Name: \_\_\_\_\_ DOB: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

School: \_\_\_\_\_ Sport/Position: \_\_\_\_\_

E-mail Address: \_\_\_\_\_  
(To be used for future class schedules, changes, and promotional information)

@Twitter: \_\_\_\_\_ @IG: \_\_\_\_\_ @Snap: \_\_\_\_\_  
(To be used for athlete recognition, promotion, and communication)

Parent Name(s): \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Primary Phone: \_\_\_\_\_ Secondary Phone: \_\_\_\_\_

E-mail Address: \_\_\_\_\_  
(To be used for future class schedules, changes, and promotional information)

**Emergency Contact if parent or guardian cannot be reached:**

Name: \_\_\_\_\_ Primary Phone: \_\_\_\_\_

I, \_\_\_\_\_, submit that my child, \_\_\_\_\_ is physically fit to participate in the strenuous athletic activity of the Legerity Sports Performance ("LSP") Speed, Movement and/or Power Class (the "Class") and acknowledge that the use of the equipment and premises, involves risk and dangers of serious bodily injury, including permanent disability, paralysis, and death ("Risks"); These Risks may be caused by the actions or inactions of me or other participants or bystanders, the conditions in which the activity takes place. Accordingly, I hereby waive LSP and their staff members from any and all liability and/or responsibility for any injury or illness sustained by me as a result of participating in the Class, and further acknowledge that I assume the risk of any such injury or illness. I hereby authorize the Class directors to act for me according to their best judgment in any emergency requiring medical attention. I understand that I am solely responsible for the payment of such medical expenses and must provide proof of medical and accidental insurance at the time of registration. I hereby further release, and shall hold harmless the LSP administrators, directors, agents, officers, members, volunteers, or employees, other participants, any sponsors, advertisers, and, if applicable, owners and lesser of premises on which any activity takes place ("Released Parties"), from all liability, claims, demands, losses, or damages caused or alleged to be caused in whole or in part by the negligence of any of the Released Parties or otherwise, including negligent rescue operations arising out of my participation in the Class. I understand that I am releasing the Released Parties from any and all liability to me, for any loss or damage to me and forever give up any claims, resulting therefrom on account of injury to person or property, whether caused by the active or passive negligence of the Released Parties. **I also understand that my payments for Class fees are not refundable or transferable under any circumstances subject to the Classes discretion.** I further understand that any Class participant who does not abide by the attached Class Rules and Regulations is subject to dismissal without refund or recourse. By signing below, I acknowledge receipt of Class Rules and Regulations. By providing my phone number, email and/or address above, I authorize the Class staff to contact me regarding any future Class events. **PHOTO/VIDEO RELEASE:** Any photograph or video taken of me while participating in any LSP class, program and/or activity may be used to publicize activities as deemed appropriate by LSP. I hereby release the Released Parties from all claims of liability relating to any of the foregoing, including, but not limited to, any claims based on rights of privacy for publicity. I have read, understood, and voluntarily accept and agree to the above liability releases and photo/video release.

X \_\_\_\_\_ DATED: \_\_\_\_\_  
(Signature of Parent or Guardian\*)

\*Please print name if other than above parent or guardian: \_\_\_\_\_