

WAIVER OF LIABILITY

I/We hereby understand and acknowledge that the training, programs and events held by *CrossFit* 2340 may expose me to many inherent risks, including accidents, injury, illness, or even death. I/We assume all risk associated with participation including, but not limited to, falls, contact with other participants, the effects of the weather, including high heat and/or humidity, and all other such risks being known and appreciated by me. I/We hereby acknowledge my responsibility in communicating any physical and psychological concerns that might conflict with participation in activity. I/We acknowledge that I am physically fit and mentally capable of performing the physical activity I choose to participate in.

After having read this waiver and knowing these facts, and in consideration of acceptance of my participation and the furnishing services to me, I agree, for myself and anyone entitled to act on my behalf, to **HOLD HARMLESS**, **WAIVE AND RELEASE** *CrossFit 2340*, its officers, agents, employees, organizers, representatives, and successors from any responsibility, liabilities, demands, or claims of any kind, arising out of my participation in the *CrossFit 2340* training, programs and/or events.

By my signature I/We indicate that I/We have read and understand this Waiver of Liability. I am aware that this is a waiver and a release of liability and I voluntarily agree to its terms.

Name (Print)	
Signature	
Date	
Ph Number	

Parent/ Guardian Signature (If under 18)	
Date	

Staff Member Signature	
Date	