## **Sportsmanship Academy Informed Consent, Waiver, & Release of Liability**

First and Last name:		Email Address:
Full Address:		0 1 1/51 "
Phone #:	Emergend	y Contact / Phone #:
How did you hear about us?	ortemanshin Academy	. We seriously recommend that you consult your physician before
starting any exercise program. Please fe (Initial) I hereby affirm that I am in would prevent or limit my participation in participating in a program of strenuous pother aerobic and anaerobic conditioning (Initial) I understand and am award equipment, and any program my trainer activities involve a risk of injury and eve I may injure myself as a result of my par release Sportsmanship Academy from a program. I hereby agree to expressly as (Initial) I hereby grant Sportsmans reproduction on any and all of its publica understand and agree that these materia authorize Sportsmanship Academy to exprograms or for any other lawful purpose written or electronic copy, wherein my lift arising or related to the use of the photo (Initial) In consideration of my part my heirs representatives, executors, adhereby release and forever discharge S both business owners and building owners.	eel free to ask our tra good physical condit an any training prograr physical activity inclu- g classes and equipr e that strength, flexib may involve me in a n death, and that I ar dicipation in any train any liability now or in ssume and accept and thip Academy permis- ations, including web- als will become the p dit, alter, copy, exhib e. In addition, I waive keness appears. Add ographs. dicipation in training in ministrators, or any oportsmanship Acade er, from claims, deman	iners any questions you have concerning your fitness. ion and do not suffer from any mental or physical disability which his provided by Sportsmanship Academy. I understand that I am ding but not limited to running, weight training, gymnastics, and ment provided by Sportsmanship Academy. lity, aerobic and anaerobic exercise including the use of exercise re potentially hazardous activities. I also understand that fitness in voluntarily participating in these activities. I fully understand that ing program provided by Sportsmanship Academy, and hereby the future occurring during or after my participation in a training
programs provided by Sportsmanship A  Coronavirus/COVID-19 Waiver  Assumption of the Risk and Waiver of L		rongvirus/COVID 10 The novel corongvirus, COVID 10, has been
declared a worldwide pandemic by the Napread mainly from person-to-person coagencies recommend social distancing a Sportsmanship Academy of Albuquerque however, the GYM cannot guarantee that GYM could increase your risk and your contagious nature of COVID-19 and volumed COVID-19 by attending the GYM and the disability, and death. I understand that the actions, omissions, or negligence of volunteers and their families. I voluntaril child(ren) or myself (including, but not like expense, of any kind, that I or my child(ren) or participation in GYM programming ("Osue, discharge, and hold harmless the Cliabilities, claims, actions, damages, cost that this release includes any Claims bate and representatives, whether a COVID-This agreement constitutes the sole and representations to me, verbally or in writering the content of	World Health Organize ontact. As a result, fer and have, in many love NM has put in place at you or your child(rechild(ren)'s risk of countarily assume the rest such exposure or he risk of becoming of myself and others, in a gree to assume a mited to, personal injuren) may experience Claims"). On my behasts or expenses of an ised on the actions, of the entire agreement begreement exists betweeting, about such train	
I hereby affirm that I have read and und	crotairu iully all tile a	
Signature		Date: