## In This Corner (ITC) Boxing Fitness Centre Inc.

## PART A – Member Profile City: \_\_\_\_\_\_ Prov.: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Phone (home): \_\_\_\_\_\_ Phone (mobile): \_\_\_\_\_ Birth date: \_\_\_\_/\_\_\_ Present age: \_\_\_\_ [ ] Male [ ] Female dd mm yyyy PART B – Parents or Legal Guardian Information (for members under age 18) 1st Parent/LG Name (Key Contact): Phone (home/work): \_\_\_\_\_\_ Phone (mobile): \_\_\_\_\_ 2<sup>nd</sup> Parent/LG Name: \_\_\_\_\_\_ Phone (home/work): Phone (mobile): Address (if different than above): \_\_\_\_\_ City: \_\_\_\_\_\_ Prov.: \_\_\_\_\_ Postal Code: \_\_\_\_\_ PART C - Medical & Other Information In case of emergency, please contact: \_\_\_\_\_\_ Relation: \_\_\_\_\_ Phone (home/work): \_\_\_\_\_\_ Phone (mobile): \_\_\_\_\_ Health concerns or injuries, please describe: Whom may we thank for referring you? OR How did you hear about us?

## In This Corner (ITC) Boxing Fitness Centre Inc.

## Waiver, Release, and Indemnity Agreement PLEASE READ THIS DOCUMENT CAREFULLY BEFORE SIGNING

Please consult your physician prior to starting any exercise or fitness program, and prior to using ITC's facility.

- I, the undersigned, acknowledge the inherent risks involved when participating in the programs offered by In This Corner (ITC) Boxing Fitness Centre Inc., of using any type of fitness equipment at In This Corner (ITC) Boxing Fitness Centre Inc., and in all other programs, sports and training activities relating therein. Accordingly, as consideration in exchange for being allowed to participate in any programs, sports, and/or training and other activities at In This Corner (ITC) Boxing Fitness Centre Inc, I agree to the following:
- 1. I acknowledge and fully understand that I will be engaging in activities that involve risk of serious injury, which may include permanent disability and even death, and severe social and economic losses which might result not only from my actions, but also from the action, inaction, or negligence of others, the rules of play, or the condition of the premises, or any equipment used, and further that there may be risks not known to me or not reasonably foreseeable. I expressly assume all risks of injury, including death, which may occur in connection with my participation in activities at In This Corner (ITC) Boxing Fitness Centre Inc.
- 2. I agree that prior to participating in any activity at In This Corner (ITC) Boxing Fitness Centre Inc., I will inspect the facility area and all equipment to be used, and if, through my inspection, I determine that anything related to that activity is unsafe, I will immediately advise the Staff or another official of In This Corner (ITC) Boxing Fitness Centre Inc., of this unsafe condition and will not participate until this condition is corrected.
- 3. I agree to assume all the foregoing risks and accept full responsibility for my own damages following such injury, permanent disability, or death.
- 4. I hereby release, discharge and waive all rights to claim or action against In This Corner (ITC) Boxing Fitness Centre Inc., its parent companies and any subsidiaries and all its respective agents, affiliates, associates, officers, directors, owners, landlords, and employees (collectively "Releasees") from demands, losses, or damages on account of any bodily injury, death or property damage caused or alleged to be caused in whole or in part by Releasees or any other party's actions, inactions, or otherwise. I also agree to indemnify Releasees from any and all third party claims caused in whole or in part by my actions.
- 5. I consent to emergency medical care and transportation in order to obtain treatment in the event of injury to me as In This Corner (ITC) Boxing Fitness Centre Inc., may deem appropriate. This Release extends to any liability arising out of or in any way connected with the medical treatment and transportation provided in the event of an emergency.
- 6. I expressly agree that the terms of release and indemnity contained herein are intended to be as broad and inclusive as is permitted by the laws of the Province of Manitoba. Any provision or portion of this Waiver, Release, and Indemnity Agreement found to be invalid by the courts having jurisdiction shall be invalid only with respect to such provision or portion. The offending provision or portion shall be construed to the maximum extent possible to confer upon the parties the benefits intended thereby. Said provision or portion, as well as the remaining provisions or portion hereof, shall be construed and enforced to the same effect as if such offending provision or portion thereof had not been contained herein.
- 7. I have been informed of the need for a physician's approval for my participation in the exercise activities, programs, and use of equipment. I have had a physical examination and have been given my physician's explicit permission to participate or I have decided to participate in the exercise activities, programs, and use of equipment without the explicit approval of my physician. I hereby assume all responsibility for my participation in said activities, programs, and use of equipment. 8. I understand that In This Corner (ITC) Boxing Fitness Centre Inc. is collecting certain personal information. I also understand this information will be used only for the purpose of administrating the In This Corner (ITC) Boxing Fitness Centre Inc. memberships and programs. I hereby consent to such collection and use of this personal information.

I have read the above Waiver, R substantial rights.	elease, and Indemnity Agreemen	t and understand that by signing below, I have give	en up
Name (Printed)	 Date	Signature	
	nd Indemnity Agreement and agre	ned parent or legal guardian of the child shown below e to its terms on behalf of my child and myself. I unde ny child and myself.	
Child's Name (Printed)	 Date	 Signature of Parent/Legal Guardian	