



## West Jefferson Weight Room Liability Waiver Form

To Contact Cory Hollingworth-AD about weight room issues call (208-214-5397). Larry Soderquist- District Maintenance (208-589-0196) or stop by WJHS Office.

**Approval of Use and Rules:** Weight room participants must turn in the liability waiver, you will be added to a list of approved weight room participants. We ask that you follow the weight room rules posted in the weight room. Of note in the rules; for safety reasons, adult participants must work out with one other person (A minimum of 2 people).

**Signing In/Out and Access:** Weight room participants must sign in and out on the weight room, Sign in and Sign out sheet located in the weight room. Only Key holder and 1 other person is allowed in room.

### Participant Liability Waiver and Hold Harmless Agreement:

Please read this waiver carefully and be aware that by registering for and participating in use of the weight room and equipment, you will be waiving your rights to all claims for injuries you might sustain out of this use and you will be required to indemnify, hold harmless, and defend the West Jefferson School district #253 for any claims arising out of use of weight room and equipment.

**Risk Of Injury:** As a participant in the use of the weight room and equipment, I recognize and acknowledge that there are certain risks of physical injury, and I agree to assume the full risk of injuries, including death, damages, or loss which I may sustain as a result of using the weight room and equipment.

**Waiver Of Injury Claims:** I agree to waive and relinquish any and all claims that may have arising out of, connected with, or in any way associated weight room and equipment use.

**Release from Liability:** I do hereby fully release and discharge West Jefferson School District #253 and its officers, agents, and employees from any and all claims from injuries, including death, damage or loss which may have or which may occur on account of use of weight room and equipment.

**Indemnity And Defense:** I further agree to indemnify, hold harmless and defend the West Jefferson School District #253 and it's officers, agents, and employees from any and all claims from injures, including death, damages, and losses sustained by me or arising out of or connected with, or in any way associated with the use of the weight room and equipment.

**In the event of any emergency, I authorize the West Jefferson School District #253 to secure from any licensed hospital, physician, and/or medical personnel any treatment deemed reasonable and necessary and agree that I will be responsible for payment of any and all medical services rendered.**

**I have read and fully understand and agree to the weight room rules and the Participants' Liability Waiver and hold Harmless Agreement.**

Signature \_\_\_\_\_ Date \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_, City \_\_\_\_\_, St \_\_\_\_\_, Zip \_\_\_\_\_

Phone (Home) \_\_\_\_\_ (Cell) \_\_\_\_\_