



Youth Strength & Cardio Training

March 3-31 (Spring 2023)



Who: 12-15 Years (6th-9th grade)

Day/Time: Fridays 11:30 am-1:00 pm

Dates: March 3, 10, 17, 24, 31

Youth will be setup on a fitness program and will be allowed to use the weight and cardio machines on their own – upon class completion.

Members \$30 – Nonmembers \$40

Sessions are limited to 8 students.

For more info, contact Tessa Anderson-Voyles, ACSM Certified Exercise Physiologist @ 605.892.2467 or www.bellefourcherec.com

Name _____ Age _____

Grade _____ Phone # _____

What types of sports/activities do you participate in?



INDIVIDUAL LIABILITY WAIVER & RELEASE FORM



The undersigned participant/parent or guardian of the participant recognizes and acknowledges that activities within or sponsored by the Belle Fourche Rec Center involve risk of serious injury, including permanent disability or death, and economic losses which might result from participant action, inaction, negligence of others, the rules of play, or the condition of the premises or any equipment used thereon. Further, I understand that there may be other risks not known or reasonably foreseeable at this time and that such risks shall be assumed by the undersigned.

This agreement is entered into in consideration of being permitted or permitting

Child's Name

to compete, play, observe, or participate in any way in events, games, or activities sponsored by or associated with the Belle Fourche Rec Center or the City of Belle Fourche.

In my absence, I authorize the employees of the Belle Fourche Rec Center and the instructor or coach of my (my child's) team/activity to call for emergency rescue services should they be necessary in the case of injury or suspected injury, or during the times that the above named individual is participating in a league, clinic, activity, game, event, or tournament being played in any way sponsored by, or associated with the Belle Fourche Rec Center.

I further understand the following issues:

- (1) that I am legally responsible for action of the above named individual including and myself, including, but not limited to any damage to private or public property caused by me/him/her.
- (2) that I am legally responsible for my own and/or my child's welfare and actions including personal needs and medical expenses; and
- (3) that this waiver of liability shall remain effective for any and all activities that I or the above named individual participated in or is a spectator of any event in any way sponsored by or associated with the Belle Fourche Rec Center.

Finally, I hereby agree to release, waive, indemnify and hold the Belle Fourche Rec Center, the City of Belle Fourche, its officers, agents, consultants, and representatives, harmless from any loss, damage, or injury which may result from my (my child's) participation or spectatorship in games, events or activities sponsored by or associated with the Belle Fourche Rec Center. This release and waiver of liability and indemnity applies equally to losses, damages, or injuries caused or alleged to be caused in whole or in part by the negligence of the Belle Fourche Rec Center or the City. I further agree to release, waive, and discharge, and covenant not to sue the City of Belle Fourche or the Belle Fourche Rec Center for any claims, demands or actions whatsoever arising out of any damage, loss or injury incurred by me or the above named individual as a result of or in the course of my or my child's participation in the activities. This release and waiver of liability and indemnity applies to me, the undersigned, as well as any of my personal representatives, assigns, heirs, and next of kin.

PHOTOGRAPHY RELEASE: The BFRC periodically photographs during BFRC sponsored programs. These pictures may be used for advertising, Internet (website/Facebook/Instagram/Twitter) and around the facility. Occasionally pictures may be taken and submitted to the newspaper or other media as well. By signing the team roster/liability waiver on this page you are also giving the BFRC/City of Belle Fourche permission to use these photographs.

I HAVE READ THIS RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT FULLY AND UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND HAVE SIGNED IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT, ASSURANCE OR GUARANTEE BEING MADE TO ME AND INTEND MY SIGNATURE TO BE COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW.

I HAVE READ THIS AGREEMENT.

Participant Name

Signature of Participant, Parent/Guardian Date

Participant Address

City

State

Zip Code

Phone Number

Emergency Contact Number/Name of Person