



## Waiver of Liability and Medical Authorization

In consideration for being allowed to participate in the hip hop dance program with Julie Labate, and in consideration of my being able to use the facilities of Max Level Fitness & Athletics space in part with Tonya Robinson and/or Nathaniel Robinson, I hereby waive, release and covenant not to sue Julie Labate (C3 Hip Hop Dance Co.) and/or Tonya Robinson and/or Nathaniel Robinson (TNR Industries, LLC, DBA Max Level Fitness & Athletics) and any fitness centers or spaces (indoor or outdoor) used, its owners, employees, instructors, or agents from all present and future claims resulting from ordinary negligence on the part of Julie Labate (C3 Hip Hop Dance Co.), Tonya Robinson and/or Nathaniel Robinson (TNR Industries, LLC, DBA Max Level Fitness & Athletics) or others listed for personal injury or death, or from loss, damage, or theft of personal property. This includes all claims arising as a result of using the facilities and equipment of Max Level Fitness & Athletics and with Tonya Robinson and/or Nathaniel Robinson (TNR Industries, LLC, DBA Max Level Fitness & Athletics), and engaging in any activities or any activities incidental thereto. On behalf of myself, my family, my heirs, or assigns, I hereby voluntarily waive all claims resulting from ordinary negligence.

Furthermore, I am aware that personal training, athletic enhancement, as well as group health and fitness activities can range from vigorous cardiovascular activity to the strenuous exertion of strength & endurance training. I understand that these and other physical activities with Julie Labate (C3 Hip Hop Dance Co.) involve certain inherent risks, including but not limited to death, serious neck and spinal injuries resulting in complete or partial paralysis, heart attacks, and injury to bones, joints, or muscles. My participation is voluntary with full knowledge of such inherent risks of property damage, personal injury, or death.

I understand that in signing this waiver, I confirm I have been cleared by my physician to participate in physical fitness activities. I understand that any pre-existing and/or new conditions, including but not limited to: heart condition, blood pressure issues, chest pain, dizziness, bone, joint or muscle problems, and drug prescriptions, must be discussed with my coach before continuing on in physical activities.

I understand that this waiver is intended to be as broad and inclusive as permitted by the laws of the state of New York and agree that if any portion is held invalid, the remainder of the waiver will continue in full legal force and effect. I further affirm that the venue for any legal proceedings shall be in the state of New York and Saratoga County.

I have read this form and fully understand that by signing this form, I am giving up legal rights and remedies that may be available to me for the ordinary negligence of C3 Hip Hop Dance Co. and Julie Labate, and/or Max Level Fitness & Athletics and Tonya Robinson and/or Nathaniel Robinson (TNR Industries, LLC, DBA Max Level Fitness & Athletics) or any of the parties listed above.

Parent/Guardian's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian's Printed Name: \_\_\_\_\_

Medical Conditions: \_\_\_\_\_