**FUNFITNESS 4 ALL WAIVER OF LIABILITY RELEASE FORM**

Please read carefully!

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, verify that I am at least eighteen (18) years of age and hereby agree to the following:

That I and my children \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

are participating in Zumba® Family classes at the Beaverbrook Community Centre ( Kanata) , Old Torbolton School (Constance Bay), Dance with Us Ottawa (Nepean).

 I recognize that this fitness activity requires physical exertion that may be strenuous and may cause physical injury, and I am fully aware of the risks and hazards involved. I understand that it is my responsibility to consult with a physician prior to and regarding my and my kids’ participation in Zumba® Family classes. I represent and warrant that I and my children are physically fit and have no medical condition that would prevent our full participation in the Zumba® Family classes provided by FunFitness4all. I hereby release, discharge, hold harmless and/or otherwise indemnify Beaverbrook Community Centre, Old Torbolton School, Dance with Us Ottawa, Marina Flaks, FunFitness4all, its officials, employees, and associated volunteer personnel, against any claim by or on behalf of myself as a result of my participation in the Zumba® Family. I fully understand the terms and conditions of this release of liability and assumption of risk agreement and sign it freely and voluntarily without any inducement. In case of emergency, I agree to allow the above parties to call for emergency medical assistance and I am aware that I am financially responsible for any medical services.

(Print Name) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Signature) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Date)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Contact \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ZUMBA FAMILY REGISTRATION FORM**

I’d like to attend ZUMBA FAMILY class

At the: (please circle the location): 1. Beaverbrook Community Centre ( Kanata)

 2. Old Torbolton School (Constance Bay)

 3. Dance with Us Ottawa (Nepean)

I am signing up for (please check): o 10 consecutive weeks - Adult $80 , Child $40

 o 5 consecutive weeks - Adult $45 , Child $25

o Drop In (pay as you go): $10/ adult, $6/child

Methods of Payment: (please circle one): Cash Check ( please make all checks payable to Marina Flaks)