



I agree to be solely responsible for any and all liability costs, damages and expenses incurred by me (or my child) as a result of injury sustained by me (or my child) from participating in any of Game On Fitness group exercise classes/personal training sessions and further agree to not hold Game On Fitness and the contracted instructors responsible in any way for any injury whatsoever. I understand that I (or my child) may incur an injury as a result of participating in any and all group exercise classes, including but not limited to, strains, sprains, tears to muscles, broken bones, heart attacks, or even death.

I attest that I (or my child) am in good physical condition, am exercising with my (or my child's) health care provider's approval and can participate in this vigorous program and have read and fully understand the above.

For good and valuable consideration, the receipt of which is hereby acknowledged, I or acting as responsible party for a child under the age of 18, hereby grant Game On Fitness permission to use my or my child's likeness in a photograph in any or all of its publications, including but not limited to all of Game On Fitness' printed and digital publications. I understand and agree that any photograph using my likeness will become property of Game On Fitness and will not be returned.

I acknowledge that since my participation with Game On Fitness is voluntary, I will receive no financial compensation.

I hereby irrevocably authorize Game On Fitness to edit, alter, copy, exhibit, publish, or distribute this photo for purposes of publicizing Game On Fitness' programs or for any other lawful purpose. In addition, I waive the right to inspect or approve the finished product, including written and electronic copy, wherein my or my child's likeness appears. Additionally, I waive any rights to royalties or other compensation arising or related to the use of the photograph.

I hereby hold harmless and release and forever discharge Game On Fitness from all claims, demands, and causes of action, where I or my child, my heirs, representatives, executors, administrators, or any other persons acting on my behalf or on behalf of my estate have or may have by reason of this authorization.

Legal Guardian's Signature and Printed Name _____

Child Under 18 Years of Age Printed Name _____

Date _____

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