



PRIMAL FITNESS

Client Information / Parkour Consent Form

Please complete both sides of this form

Personal Information	
Full name	
Nickname	
Home address	Street
	City, ST, Zip
Phone <input type="checkbox"/> Home <input type="checkbox"/> Mobile	
e-mail - Print CLEARLY PLEASE <small>We will not share your email but will use it to contact you</small>	
Birth date (MM/DD/YYYY)	
Emergency Contact Name (ICE) <small>Please save on cell phone under ICE</small>	
ICE Home Phone Number	
ICE Mobile Phone Number	
ICE Relationship	
Height <small>(used to calculate power output)</small>	
Weight <small>(used to calculate power output)</small>	
Current Fitness Level (circle one)	Low Medium High PRIMAL
Have you done a CrossFit or Primal Fitness workout before?	YES NO HERE At _____
Occupation	
Training Interests / Goals	
Do you have any injuries, recent illness, surgery or medical condition?	
How did you hear about us?	<input type="checkbox"/> Google Ad <input type="checkbox"/> FaceBook <input type="checkbox"/> Search for <input type="checkbox"/> Parkour <input type="checkbox"/> CrossFit <input type="checkbox"/> Friend <input type="checkbox"/> Other _____

OVER >>>

Both sides must be completed

PRIMAL FITNESS

Parkour Waiver and Release

I wish to receive training and instruction in the sport of Parkour (the "Training") from Primal Fitness, Inc. (together with all of its shareholders, directors, officers, employees, agents, representatives, servants, assigns and successors, "Primal Fitness").

I ACKNOWLEDGE THAT THE TRAINING INVOLVES HIGH INTENSITY EXERCISES INCLUDING BUT NOT LIMITED TO; LIFTING WEIGHTS, BODYWEIGHT EXERCISES, RUNNING AND SIMILAR MOVEMENTS BOTH INDOORS AND OUTDOORS IN HEAVILY-CONGESTED URBAN AREAS, CONTACT WITH OBSTACLES AND OTHER HUMANS, AND THAT ACCORDINGLY SERIOUS INJURY AND EVEN DEATH MAY RESULT FROM PARTICIPATING IN THE TRAINING. I KNOW AND UNDERSTAND THE SCOPE, NATURE, AND EXTENT OF THE RISKS INVOLVED IN PARTICIPATING IN THE TRAINING AND VOLUNTARILY AND FREELY CHOOSE TO INCUR ANY AND ALL SUCH RISKS AND DANGERS, EVEN IF ANY SUCH RISK OR DANGER ARISES FROM THE ACTIONS OR INACTIONS OF PRIMAL FITNESS.

I represent that I am in good physical condition and am otherwise physically capable of participating in the Training, and that I do not suffer from any condition which may endanger my safety or the safety of anyone else participating in the Training, including but not limited to pregnancy, epilepsy, hypertension, cardiovascular disease, skeletal or joint or ligament problem or condition, asthma, emphysema, or chronic obstructive pulmonary disease.

I, ON MY OWN BEHALF, AND ON BEHALF OF MY EXECUTORS, PAST AND PRESENT HEIRS, ASSIGNS, AND PERSONAL AND LEGAL REPRESENTATIVES DO HEREBY WAIVE, RELEASE AND FOREVER DISCHARGE PRIMAL FITNESS, OF AND FROM ANY AND ALL CLAIMS, DEBTS, DEMANDS, RIGHTS, LIABILITIES, CAUSES OF ACTION, LOSSES, DAMAGES, COSTS OR EXPENSES, INCLUDING REASONABLE ATTORNEYS' FEES (COLLECTIVELY, "CLAIMS") OF WHATSOEVER KIND AND NATURE, ARISING FROM, RESULTING FROM, OR RELATING IN ANY WAY TO THE TRAINING. I agree and covenant not to sue or bring any Claims against Primal Fitness with respect to any matters arising out of or relating to the Training. In the event that I or anyone else on my behalf institutes any such action, that Claim shall be dismissed upon presentation of this Waiver and Release and I will reimburse Primal Fitness for all legal fees and expenses incurred in defending such Claim and obtaining its dismissal.

I agree and acknowledge that my participation in the Training may be recorded in one or more medium. I authorize Primal Fitness to photograph, record and otherwise exploit my image, likeness and voice (together, "My Likeness") and to use, exhibit, publish and distribute written works, recordings, productions, photographs and other exploitations containing any part of My Likeness made by or on behalf of the Primal Fitness for any purpose and in any medium now known or hereafter developed (together, "the Materials"). I acknowledge that Primal Fitness will be the sole owner of all rights in and to the Materials, including all rights of copyright, for all purposes, regardless of the form or medium in which they are produced or used. Primal Fitness shall have the right, among other things, to edit the Materials at its discretion, to incorporate part or all of the Materials, to use, duplicate, exhibit, broadcast and distribute the Materials and to license others to do so in all media. I waive any right that I may have to inspect or approve any part of the Materials that incorporate My Likeness. I release and discharge Primal Fitness from, and hereby agree to indemnify, defend, and save harmless, Primal Fitness from any and all Claims I or any third party may have now or in the future for invasion of privacy, right of publicity, copyright infringement or other Claims arising out of the use, exploitation, reproduction, adaptation, distribution, broadcast, performance, or display of My Likeness. I acknowledge that I will not receive any monetary compensation from Primal Fitness for any use of My Likeness. I warrant that I am at least eighteen years of age, and have every right to enter into this Waiver and Release.

I HAVE READ THIS WAIVER AND RELEASE AND FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

Signed: _____

Dated: _____

OVER>>>>

Both sides of this form must be complete