

Liability Waiver



Guest Information:

Name

Address

Town State Zip

Phone Birth Date (mm/dd/yy)

Email

Sponsor (Team) First Time Guest? (Y/N)

Do you have any health issues that we should be aware of during your visit?
 Yes No

If "Yes" please explain:

Reason(s) for visit/Area(s) of interest:

- | | | |
|---|---|---|
| <input type="checkbox"/> Batting Cages | <input type="checkbox"/> Baseball/Softball Clinic | <input type="checkbox"/> Membership Inquiry |
| <input type="checkbox"/> Racquetball Courts | <input type="checkbox"/> Group Exercise | <input type="checkbox"/> Other |
| <input type="checkbox"/> Swimming Pool | <input type="checkbox"/> Personal Training | |
| <input type="checkbox"/> Tennis Courts | <input type="checkbox"/> Sports Training | |
| <input type="checkbox"/> Turf Field | <input type="checkbox"/> Swim Lessons | |
| <input type="checkbox"/> Weight Room | <input type="checkbox"/> Team Mizuno Northeast | |
| | <input type="checkbox"/> Tennis Clinic/Lessons | |

If Other Please Specify: _____

Liability Waiver: By signing below, I agree that I am familiar with the risks and perils inherent in all activities at the Shrewsbury Athletic Club, am aware of the risks of personal injury to myself and my children when undertaking such, and voluntarily assume and, in the absence of gross negligence or recklessness, hereby release the Shrewsbury Athletic Club, its successors and/or assigns, including agents, officers, and employees from all risks associated with my use and/or my children's use of the property. I also agree to hold the same harmless in the absence of gross negligence or recklessness for any and all losses of personal property or damage to personal property, including theft, associated with my use or presence on grounds owned or leased by the Shrewsbury Athletic Club, its successors or its assigns. If I am signing below on behalf of a minor that is not my child, I hereby agree to indemnify and forever hold harmless the entity name above by the terms described above for any and all injuries sustained to the minor child while on the premises. I also represent that I have parental permission to engage in such a release and indemnification.

Guest Signature (Member signature if guest is under age 18)

Today's Date

Staff Initials