

Tony Ortiz's Linebacker University

Adult and Minor Participant's Agreement

PARTICIPANT'S
NAME

AGE

(PLEASE PRINT)

WAIVER AND LIABILITY

By Checking this box I certify that I, am a parent or legal guardian of the above-referenced minor child (herein referred to as the "Athlete") named on this Release.

ACKNOWLEDGEMENT OF RISK AND DANGER AND ASSUMPTION OF RISK

By Checking this box I understand and am aware that the use of Tony Ortiz's Linebacker University (herein referred to as "LBU") and equipment has inherent and unanticipated and unknown risks and dangers that may cause injuries or death. I expressly assume all risk or injury or death that may be sustained during my use of the facilities and equipment, its officer s, director, agents and employees, defects in the facilities and equipment, the negligence of others and my own negligence or misuse.

PARENT/GUARDIAN/CONSERVATOR INDEMNIFICATION AGREEMENT

By checking this In consideration of the Athlete being permitted to use the services provided by LBU and its' equipment, I agree to indemnify and hold harmless this company

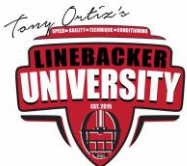
RELEASE

By checking this box I acknowledge and agree that: I declare that the Athlete has no known medical problems that would preclude his/her participation in the LBU program and the information provided to LBU regarding his/her medical history and physical condition is, to the best of my knowledge, true and correct. The Athlete's participation in LBU performance training is voluntary and I assume all risk of injury or contraction of any illness or medical condition that may result, or the aggravat ion of any pre-existing medical condition the Athlete may have, or any damage, loss or theft of any personal property resulting or arising out the Athlete's participation in the Program. I understand and acknowledge that LBU has no expertise in diagnosing, examining, or treating any medical condition, whether existing or incurred as a result of my participation in the Program. I understand and acknowledge that LBU has made no guarantee of success or improvement as a result of my participation in the Program. I hereby, on behalf of myself, personal representatives, heirs, executors, administrators, agents and assigns, forever release and discharge LBU, and its affiliates / and their respective affiliates, employees, agents, representatives, successors, and assigns from any and all claims or causes of action (known or unknown) that the Athlete may now have or will have in the future arising out of or related to my enrolment in the Program or the services provided to me. This waiver and release of liability includes, but is not limited to, injuries that result from (a) use of any exercise equipment or facilities provided by LBU, (b) use of any exercise equipment or facilities which may malfunction, and (c) any injuries which occur because of slipping and falling while training at an LBU training site or equipment.

I HAVE CAREFULLY READ THIS WAIVER AND RELEASE AND FULLY UNDERSTAND THAT IT IS A COMPLETE RELEASE OF LIABILITY, THAT I HEREBY WAIVE ANY RIGHT THAT I MAY NOW HAVE OR WILL HAVE TOO BRING ANY LEGAL ACTION AGAINST LBU, ITS EMPLOYEES, AGENTS, SUCCESSORS OR ASSIGNS, FOR ANY LIABILITIES THAT MAY RESULT, WHETHER DIRECTLY OR INDIRECTLY, FROM LBU TRAINING.

CONFIRMATION

By checking this box I confirm that I have read and have agreed to the above statements and will not sue LBU for any instances that may occur.



Tony Ortiz's Linebacker University

Adult and Minor Participant's Agreement

FINANCIAL POLICY

Check the one that applies:

By Checking this box, I certify that the Athlete is an irregular (drop-in) client and that I am aware of, and agree to adhere to LBU's financial policy as follows:

Payments for drop-in clients are \$25 per session, per client. Payments may be made by cash or by PayPal to stephanie.ortiz29@gmail.com. Remittance of any other form of payment will need to be approved by LBU on a case by case basis.

-OR-

By Checking this box, I certify that the Athlete is a regular (monthly) client and that I am aware of, and agree to adhere to LBU's financial policy as follows:

Invoices will be administered on a monthly basis and will be due by the of each month

The invoice covers four (4) guaranteed Private training sessions, conducted by Tony Ortiz. Each session will take place at the predetermined training schedule as agreed upon by both parties.

This training package includes unlimited participation in the Group training sessions conducted by Tony Ortiz.

In the event that inclement weather forces a postponement of a scheduled Private training session, a makeup session will be offered and carried out on a mutually agreeable day and time.

I understand that the payment I made guarantees the Athlete's time slot and that payment is still due in full even if the Athlete forfeits a previously scheduled time.

Payments may be made by cash or by PayPal to stephanie.ortiz29@gmail.com. Remittance of any other form of payment will need to be approved by LBU on a case by case basis.

BY ENTERING YOUR FULL NAME YOU CERTIFY THAT YOU ARE THE PARENT OR LEGAL GUARDIAN OF THE ATHLETE WITH WHOM THIS AGREEMENT COVERS.

**Parent or Legal Guardian's Name
(Printed):**

Parent or Legal Guardian's Signature:

Date:

