Waiver and Release of Liability

Signature of Applicant



Rock Steady Boxing, Inc. (hereinafter, "RSB"):

Name:	Phone:
Address:	City:
Zip Code:	Email:
Emergency Contact:	Phone:
believe that I am physically cap may be conducted in facilities entities, during the activity. I f	e of Rock Steady Boxing, Inc.'s activities, and my physical condition and capabilities, and I pable of participating in such activity. I further acknowledge that I am aware that the activity open to the public or members of the public and/or employees of another corporate entity or urther agree and warrant that any time, if I believe any condition to be unsafe, I reserve the I or otherwise, to immediately discontinue further participation in the activity and bring such management of RSB.
INJURY, including permanent or by the actions or inactions of THE NEGLIGENCE OF T economic losses either known	TAND that (a) the activities of RSB involve risks and dangers of SERIOUS BODILY disability, paralysis and death ("Risks"); (b) these Risks and dangers may be caused by me of others participating in the activity, the conditions under which the activity takes place, or HE "RELEASEES" NAMES BELOW; (c) there may be other risks and social and to me or not readily foreseeable at this time, and I FULLY ACCEPT AND ASSUME ALL ESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES incurred as a result of my
save and hold Harmi administrators, directors, agent applicable, owners and lessors herein) from all liability, claim part by the negligence of the despite this release, I or anyon payment to any or all of the	SE, DISCHARGE, COVENANT NOT TO SUE, AND AGREE TO INDEMNIFY AND LESS RSB, Force Sports Training, Inc., Pure Force Fitness, its clubs and their respective is, officers, volunteers, and employees, other participants, any sponsors, advertisers, and if it of premises on which the activities take place (each considered one of the "Releasees" is, demands, losses, or damages on my account caused or alleged to be caused in whole or in "Releasees" or otherwise, including negligent rescue operations and further agree that if, he on my behalf makes a claim against any of the Releasees, I will be responsible for the releasees harmed by such assertion of a waived claim, or any expenses arising from my auses of action, including but not limited to reasonable attorney fees and court costs.
months preceding the dates of fainting spells, and should I ex	had no injuries to my hands, whether fractures, broken bones, or otherwise, within the three completion of this entry form, and have no injuries to the head, concussion, headaches or perience any of these injuries and/or conditions in the future, I will immediately notify the conditions, and immediately cease my participation in said events and activities.
construed as a modification of term and provision of this agre	that this agreement may not be modified orally, and a waiver of any provision shall not be any other provision herein or as consent to any subsequent waiver or modification. Every ement is intended to be severable, if any one or more provision is found to be unenforceable not affect the other terms and provision, which shall remain binding and enforceable.
	Date / /