KELLOGG COMMUNITY COLLEGE
Fitness Center Waiver & Release

I understand and agree that the exercise opportunities offered through the facilities of this UNSUPERVISED fitness center allow a person to engage in various exercise and/or physical activities potentially beneficial to one’s health and wellbeing.

However, I recognize and understand that there are inherent risks of various physical and mental conditions, illness and/or injuries associated with:
  - Engaging in any exercise or physical activity
  - The use of equipment at this center
  - The use of the center’s facilities

I recognize and understand that such risks in an UNSUPERVISED fitness center include any and all types of physical injuries, physical and mental conditions and/or illness, including, but not limited to, sprains, strains, broken bones, concussions, lacerations, abnormal blood pressure, heart beat disorders, fainting, shortness of breath, chest pain, strokes, heart attack, or even death.

I future recognize and understand that any and all such risks are compounded, in that many of the exercises and/or physical activity opportunities of the fitness center are UNSUPERVISED, including, but not limited to the use of its cardio machines, use of the building, and/or all types of exercise equipment.

I hereby agree and consent to voluntarily engage in any and all exercise and physical activity opportunities, UNSUPERVISED, at this fitness center, to voluntarily use the center’s exercise equipment, and to voluntarily use the facilities at my own risk and with full knowledge and appreciation of any and all dangers and risks inherent therein.

I hereby assume full responsibility for any and all risks to any bodily injury, illness, death, and/or property damage or loss suffered by me.

I hereby assume release, waive, and forever, discharge and/or covenant not to sue this institution or any of its affiliates and successors, directors, managers, offices, agents, servants, and/or their employees for any and all loss, liability, damage or cost, and/or any claim or demands of any type, known or unknown, on account of or in any way related to any illness, condition, and/or injury of my person or property, or which may result in my death.

I hereby agree to indemnify and hold harmless this institution and/or any of their affiliates and successors, directors, managers, offices, agents, servants, and/or their employees for any and all loss, liability, damage or cost of any type which they may incur as a result of or related to any illness, condition, and/or injury to my person or property or as a result of my death, and/or as a result of engaging in any exercise and activity opportunities at this fitness center, and any use of the fitness center’s equipment and/or any use of the center’s facilities.

I further hereby acknowledge the existence of, the need for, and my understanding of, certain rules and regulations concerning the use of the fitness center’s equipment, facilities, and other procedures related to activities at the center. I therefore agree to abide by any and all such rules adopted by the center.

I hereby acknowledge that I have read the preceding prior to signing, and understand that I am executing a consent, release waiver of liability, and indemnity agreement.

______________________________________  ______________________
Signature                                      Date

PLEASE PRINT:
Name:____________________________________

IN CASE OF EMERGENCY, PLEASE CONTACT:

Name:____________________________________

Relationship:_____________________________  Phone (Day)____________________  (Evening)____________________