



St. Bernards “Free January” Membership Registration & Waiver

Date: _____ Date of Birth: _____ Department: _____

First Name: _____ **Last Name:** _____

Address: _____ City: _____ State: _____ Zip: _____

Email Address: _____ Phone: _____

Emergency Contact Name: _____ Phone: _____

Have you been a member of Health & Wellness in the past? Yes or NO

If yes, why did you cancel? _____

What are your greatest challenges when it comes to committing to a regular fitness routine? _____

Would you like someone to contact you to discuss your fitness goals? Yes or No

Welcome to Health & Wellness and thank you for your feedback.

By using SBH&W you are assuming all risks associated with any equipment, services or classes inside or on the premises of SBH&W. If the participant is under 18, the undersigned agrees that the participant has the undersigned's permission to participate and use SBH&W and participate therein. Additionally, you are releasing all claims for injuries, damages or loss which you or your minor participant might sustain as a result of participating in any and all activities connected with said equipment, services or classes (including transportation services/vehicle operation, when provided by SBH&W). I recognize and acknowledge that there are certain risks of physical injury to participating in activities at the SBH&W and I voluntarily agree to assume the full risk of any injuries, damages or loss regardless of severity that I or the minor participant may sustain as a result of such participation. I relinquish all claims I, or the minor participant may have as a result of participating in any activity at the SBH&W and hold harmless its officials, agents, employees, volunteers or directors from all liability of any kind to me, the minor participant, our personal representatives, assigns, heirs and executors. I do hereby full release and forever discharge St. Bernards Health & Wellness from any and all claims for injuries, damages or loss that I or the minor participant may have or which may accrue to me or the minor participant arising out of, or connected with any participation in any activity at SBH&W.

Signature of Guest: _____ Date: _____

SBH&W Representative: _____