

TRAINING RELEASE FORM



ACKNOWLEDGEMENT

_____ (initial) I hereby release Challenge To Change, Inc. LLC and all faculty and guest teachers from any liability or responsibility having to do with my personal health and physical safety during teacher training.

ASSUMPTION OF RISK

_____ (initial) I am aware that my participation in the teacher training may be a hazardous activity. I acknowledge that a certain minimum level of physical health, strength, fitness and flexibility are required. I am voluntarily participating in these activities with knowledge of the risks of injury for which I will voluntarily assume. I acknowledge that I have read the LEGAL LIABILITY RELEASE and agree to the terms outlined in this entire document.

LEGAL LIABILITY RELEASE

As consideration for being permitted to participate in Challenge To Change, Inc., activities, and outlines, I hereby agree that I, myself, my assignees, heirs, guardians, and legal representatives will not claim against, sue or attach the property of Challenge To Change, Inc. and guest teachers for injury or damage resulting from my participation in any lesson, class, workshop, excursion, or activity. I hereby release Challenge To Change, Inc. and all Challenge To Change, Inc. faculty and guest teachers and all agents and heirs from any and all such actions, claims, or demands that I, my assignees, heirs, guardians and legal representatives now have or hereafter may have for injury or damage associated with my participation in ANY offerings of Challenge To Change, Inc. and for all claims, injury damages, or liability suffered by me in connection with my teacher training, individuals hereby acknowledge that before participating in an exercise program that they should consult with a physician.

I have carefully read this entire agreement and fully understand the above contents. I am aware and agree that this is a complete release of liability voluntarily assumed for my participation in all activities with Challenge To Change, Inc. LLC.

Printed Name _____

Signature _____

Date _____

Please remove from binder and give to Challenge to Change, Inc. team member; let them know if you would like a copy.

