

CONSENT AND RELEASE FORM (MINOR)

I, the parent/guardian of _____, a minor, do hereby consent to my child's participation in the voluntary fitness program held the All About You studio located at 23 Village Inn Road, Westminster, MA.

I also agree to forever release All About You and all their instructors, employees, agents, board members, volunteers and any and all individuals and organizations assisting or participating in the voluntary program from any and all claims, rights of action and causes of action that may have arisen in the past, or may arise in the future, directly or indirectly, from personal injuries to my child or property damage resulting from my child's participation in All About You's voluntary fitness program.

I also promise to indemnify, defend, and hold harmless the Releases against any and all legal claims and proceedings of any description that may have been asserted in the past, or may be asserted in the future, directly or indirectly, arising from personal injuries to my child or property damage resulting from my child's participation in All About You's voluntary fitness program.

I further affirm that I have read this consent and Release Form and that I understand the contents of this Form. By signing this Form, I affirm that I have decided to allow my child to participate in All About You's voluntary fitness program with full knowledge that the Releasees will not be liable to anyone for personal injuries and property damage my child or I may suffer in the voluntary fitness program.

Do you or your child have any pre-existing medical or musculoskeletal limitation condition? _____. If yes, he/she must have a medical examination before starting any form of exercise program here at All About You.

Name: _____

Address: _____

Telephone _____ Email: _____

Emergency Contact: _____

Child Name: _____

Parent's Signature: _____ Date: _____