

Disclaimer

- 1. I am not aware of any medical condition or impairment that will be detrimental to my health if I participate in this activity.
- 2. I acknowledge that before participating in this activity I am required to seek medical advice to ensure I am fit to participate and I undertake to obtain that advice before commencing the activity.
- 3. I acknowledge that it is a condition of participating in this activity that I do so at my own risk. I accept all risks and in consideration of my entry, I, my heirs, executors and administrators release and forever discharge the Ipswich Hospital Foundation, their employees, members, promoters, volunteers, servants, agents and subcontractors, instrumentalities, and all voluntary community groups assisting with this activity, all sponsors, producers their agents and representatives and any person or body, directly or indirectly associated with the activity of all liabilities, claims, damages or costs which I may have against them arising out of, or in any way connected with my participation in the activity. I understand this waiver includes claims based on negligence, action, or inaction of any of the above parties. This release continues forever and binds my heirs, successors, executors, personal representatives and assigns.
- 4. I consent to the publication and/or use in any form of media whatsoever of my name, image, voice, statements or otherwise, before, during or after the activity whether for advertising, promotion or otherwise, without payment or compensation.

Things to consider: Bring and wear appropriate workout wear/accessories. If you fall ill please consider others and refrain from attending to stop the spread of germs.

If signing for a person under 18 years of age, I certify that I am the parent/guardian of the 'minor' who will be participating in the Activity. In consideration of the Activity organizer accepting the minor's application to participate in the Activity, I agree to indemnify and shall keep indemnified the Organisers pursuant to the above legal declaration.

IHF Fit4Life Fitness Activities Registration

session information via email

I hereby acknowledge that I have read the Disclaimer and agree to its terms and conditions. If under 18, a parent or guardian must sign this form.

Name		
Address		
Suburb	Postcode	
Email		
Phone		
Signature		
☐ I do not wish to receive undates and		V