

# SPORTS LAB

performance enhancement services

[www.sportslabbrighton.com](http://www.sportslabbrighton.com)

8571 W. Grand River Ave. - Suite 1000 - Brighton, Michigan 48116 - ph (810) 229-7019

Participant's Name:

\_\_\_\_\_  
*(please print)* (Last) (First) (Middle Initial)

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Day time phone: \_\_\_\_\_ Home phone: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Age: \_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_  
*(please print)* (Last) (First) (Middle Initial)

## Waiver and Release of Liability

*Please read carefully before signing*

\_\_\_\_\_  
(initial) I understand and agree that before I begin any exercise program I should consult a physician and have a physical examination. I understand and agree that the recommendations, instructions and advice received by SPORTS LAB, LLC, its owner, agents, or employees are in no way intended to be construed as medical advice and are offered for informational purposes only. I further understand that SPORTS LAB, LLC makes no warranties or representations regarding any advice received by the owner, agents, or employees of SPORTS LAB, LLC.

\_\_\_\_\_  
(initial) I understand that SPORTS LAB, LLC, its owner, agents or employees cannot confirm certain representations made by me including, but not limited to, representations as to my diet, physical condition or workout regime.

\_\_\_\_\_  
(initial) I know that activities engaged in through SPORTS LAB, LLC, whether on the premises or outside the premises, are potentially hazardous activities. I agree to abide by any decision by SPORTS LAB, LLC, its owner, employees or agents as to my ability to safely complete any activity whether on or off of the premises. I assume all risks with said activities including, but not limited to, falls, contact with other athletes, effects of weather, including high heat and humidity, traffic and the condition of the road outside of the premises, all such risks being known and appreciated by me.

\_\_\_\_\_  
(initial) I understand and agree that activities engaged in through SPORTS LAB, LLC, whether on the premises or outside of the premises, may involve inherent and **other risks of INJURY, or DEATH** whether I or someone else causes it. **I voluntarily agree to expressly assume all risks of injury or death** that may result from said activities including, but not limited to, injury or death caused by

anyone acting on SPORTS LAB, LLC's behalf or anyone engaging in activities through SPORTS LAB, LLC. Said activities include, but are not limited to, those activities which in any way relate to the use of equipment on or off the premises of SPORTS LAB, LLC.

\_\_\_\_\_  
(initial) I agree that SPORTS LAB, LLC, its owner, employees or agents will not be liable for any injury including, but not limited to, personal, bodily or mental injury, economic loss or any damage to me, my spouse, guests, unborn children, or relatives resulting from negligence by SPORTS LAB, LLC, its owner, employees or agents or anyone acting on behalf of SPORTS LAB, LLC or anyone engaging in activities through SPORTS LAB, LLC.

\_\_\_\_\_  
(initial) I further understand that SPORTS LAB, LLC does not manufacture any of the equipment on its premises, but purchases and/or leases the equipment from third parties. As such, I understand and acknowledge that SPORTS LAB, LLC is providing recreational services and may not be held liable for defective products.

\_\_\_\_\_  
(initial) If there is any claim by anyone based on injury, loss, or damage described here which involves me or my guest, I agree to (1) defend SPORTS LAB, LLC against such claims and pay for all expenses relating to the claim and, (2) indemnify SPORTS LAB, LLC for all liabilities to me, my spouse, guests, relatives, or anyone else, resulting from such claims. Having read this waiver and knowing these facts and, in consideration of SPORTS LAB, LLC allowing me to use the facility and otherwise engage in activities through SPORTS LAB, LLC, I and anyone entitled to act on my behalf, hereby waive and release SPORTS LAB, LLC, its owner, employees and employees as set forth herein.

I HEREBY RELEASE SPORTS LAB, LLC AND ITS OWNERS, EMPLOYEES, AGENTS, EQUIPMENT SUPPLIERS AND MANUFACTURERS, SUCCESSORS AND ASSIGNS FROM ANY AND ALL LIABILITY FOR DAMAGE OR INJURY TO ME OR TO ANY OTHER PERSON OR PROPERTY IN CONNECTION WITH ANY SERVICES OR FACILITIES PROVIDED BY SPORTS LAB, LLC, ACCEPTING MYSELF THE FULL RESPONSIBILITY FOR ANY AND ALL SUCH DAMAGE OR INJURY OF ANY KIND RESULTING FROM ANYONE ACTING ON BEHALF OF SPORTS LAB, LLC OR ANYONE ENGAGING IN ACTIVITIES THROUGH SPORTS LAB, LLC.

I HAVE MADE NO MISREPRESENTATION TO SPORTS LAB, LLC, ITS OWNERS, EMPLOYEES, AND AGENTS IN REGARD TO MY AGE OR PHYSICAL CONDITION. THIS RELEASE INCLUDES CLAIMS BASED UPON NEGLIGENCE, BREACH OF CONTRACT, AND STRICT PRODUCT LIABILITY.

Participant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I UNDERSTAND, HAVE READ AND UNDERSTAND THIS LIABILITY RELEASE AGREEMENT. I AFFIRM THAT I HAVE THE AUTHORITY TO ENTER INTO THIS AGREEMENT ON BEHALF OF THE MINOR PARTICIPANT. I AM REPRESENTING AND I AGREE TO BE BOUND BY THE TERMS OF THIS AGREEMENT.

Parent/Guardian's Signature: \_\_\_\_\_ Date: \_\_\_\_\_