



## **Informed Consent \* Release and Waiver**

### **PARENT/GUARDIAN INDEMNIFICATION AGREEMENT FOR A MINOR**

In consideration of my child/ward being permitted to use the AROC Sports Training, LLC facilities, services, and equipment, I agree to indemnify and hold harmless AROC Sports Training, LLC, its successors and assigns, and its officers, owners, directors, agents, affiliates, members, representatives, trainers and employees from any claims, demands, damages, costs, expenses, actions, causes of action and liability of any kind or judgments made by or on behalf of my child/ward arising out of or during my child/ward's use of the AROC Sports Training, LLC facilities and equipment.

\_\_\_\_\_/\_\_\_\_\_

### **RELEASE, COVENANT AND PROMISE NOT TO SUE, INDEMNIFICATION AGREEMENT**

I understand and am aware that the use of AROC Sports Training, LLC facilities and equipment has inherent and unknown risks and dangers that may cause injuries or death. I expressly assume all risks of injury or death that may result during my use of the facilities and equipment. I further hold harmless AROC Sports Training, LLC, its successor and assigns, and its officers, owners, directors, agents, affiliates, members, representatives, trainers and employees, from any and all defects in the facility and equipment, ordinary negligence, the negligence of others, and my own negligence or misuse.

In consideration of being permitted to use the AROC Sports Training, LLC facilities, services and equipment, I hereby release, acquit and discharge AROC Sports Training, LLC, its successors and assigns, and its officers, owners, directors, agents, affiliates, members, representatives, trainers and employees (collectively the "Releasees") from all claims, demands, damages, costs, expenses, actions, causes of action and liability of any kind (collectively the "Claims") in respect of death, injury, loss or damage to myself or property howsoever caused, arising or to arise by reason of or during my participation and/or involvement in any activity undertaken at, arising from or related to AROC Sports Training, LLC facilities, services and equipment, and notwithstanding that any Claim may have been contributed to or occasioned by the ordinary negligence of any of the Releasees.

I will not sue or commence any action of any kind against AROC Sports Training, LLC, its successors and assigns, or its officers, owners, directors, agents, affiliates, members, representatives, trainers or employees.

I further understand and acknowledge that AROC Sports Training, LLC does not carry or maintain health, medical or disability insurance coverage for the undersigned and therefore agrees to assume responsibility for such insurance coverage on the undersigned.

Further, in consideration of being permitted to use the AROC Sports Training, LLC facilities, services, and equipment, I agree to indemnify and hold harmless AROC Sports Training, LLC, its successors and assigns, and its officers, owners, directors, agents, affiliates, members, representatives, trainers and employees from any Claims and/or judgments on such Claims arising out of my use of the AROC Sports Training, LLC facilities and equipment.

I further agree that in the event that any provision of this Release and Promise Not to Sue is held to be invalid or unenforceable by any court of competent jurisdiction, the invalidity or unenforceability of such provision will not affect the remaining provisions of this Release and Indemnity which shall continue to be enforceable.

\_\_\_\_\_ If minor, parent/guardian initials.

**Please read the following regarding training protocols.**

1. Training, testing and evaluations will be done by the staff or agents of AROC Sports Training, LLC.
2. I hereby consent to and permit AROC Sports Training, LLC to use the data obtained in reports or publications, but my identity will not be associated with such reports unless I have given specific written permission to do so.
3. To recognize the performance improvements and accomplishments of our athletes, we will at times post their name, picture, accomplishment, and school or team within our facility and/or on our website ([www.arocspeed.com](http://www.arocspeed.com)). I hereby consent to and permit AROC Sports Training, LLC to use my name, picture, accomplishment, school and/or team name within the facility and on the above website.  
\_\_\_\_\_ Yes, I approve. \_\_\_\_\_ No, please do not use my name.
4. During my participation in AROC Sports Training and Testing programs I understand that there will be times that I will experience one on one contact with staff members for the purpose of instruction on stretching and performance.
5. I understand that for my safety during treadmill workouts, that an AROC Sports Training, LLC staff member will spot me which requires the placement of the hand in the lumbar-sacral area to stabilize my trunk and assist me as I run, especially during elevation running. I understand, and consent to, such one on one contact, as well as other training related touching or contact.
6. I understand that this program should not result in physical injury to me. However, I acknowledge that participation in ANY exercise/fitness program involves risk. Common conditions include changes in blood pressure, light-headedness, nausea, changes in heartbeat and in rare instances heart attack or stroke.
7. In the event of physical injury resulting from participating in the AROC Sports Training program, no monetary compensation will be provided by AROC Sports Training, LLC. Claims must be handled through my own health insurance policy.
8. I acknowledge that AROC Sports Training, LLC is relying on all information provided by me regarding my medical history and condition before allowing me to participate in any evaluation or program. I certify that the information provided is true and correct.

---

Name of Athlete (Print)	Signature of Athlete	Date
-------------------------	----------------------	------

If the athlete is under 18 years of age, parental/guardian consent is required. I have read, understand and agree to all of the above.

---

Name of Parent or Guardian (Print)	Signature of Parent or Guardian	Date
------------------------------------	---------------------------------	------