

Release of Liability/Informed Consent **For 2015 Black Hills Strongman Event**

1. In consideration of being allowed to participate in the Black Hills Strongman Event hosted by Hurricane Fitness and to use its facilities, equipment, and services, in addition to the payment of any fee or charge, I do hereby forever waive, release, and discharge William Hayford DBA Hurricane Fitness or its employees or contractors and its officers, agents, employees, representatives, executors and all others acting on their behalf from any and all claims or liabilities for injuries or damages to my person and/or property, including those caused by the negligent act or omission of any activities, programs or services of Hurricane Fitness or its employees or contractors or the use of any equipment during the event. (Please initial: _____)

2. I have been informed of, understand and am aware of the dangers that come along with participating in this event. I also have been informed of, understand and am aware that competing involves a risk of injury, including a remote risk of death or serious disability, and that I am voluntarily participating in these activities and using equipment and machinery with full knowledge, understanding and appreciation of the dangers involved. I hereby agree to expressly assume and accept any and all risks of injury or death. (Please initial: _____)

3. I do hereby further declare myself to be physically sound and suffering from no condition, impairment, disease, infirmity or other illness that would prevent my participation in these activities or use of equipment or machinery. I do hereby acknowledge that I have been informed of the need for a physician's approval for my participation in the exercise activities, programs and use of exercise equipment.. I acknowledge that either I have had a physical examination and have been given my physicians permission to participate or I have decided to participate in the competition without the approval of my physician and do hereby assume all responsibility for my participation in said activities, program and use of equipment. (Please initial: _____)

4. I understand that Hurricane Fitness hosting this event does not constitute an acknowledgment, representation or indication of physiological well-being or a medical opinion relating thereto. (Please initial: _____)

Date: _____

Signature _____

Please Print Name _____