



# Huntley Community Association

'Building our Community, one Neighbour at a Time'

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## Huntley Community Association - WALKING CLINIC REGISTRATION and WAIVER

The Walking Clinic will run for 10 weeks on Friday mornings (April 9 to June 11 2021)

Participant Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Phone #: \_\_\_\_\_  
Address: \_\_\_\_\_

Allergies/Medical concerns (Please discuss these with the Instructor):  
\_\_\_\_\_

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### Physical Activity Statement:

I understand that some activities that are suitable for most individuals in this group may not be suitable for me personally, and I agree that I am personally responsible for knowing my limits.

I understand that certain risks of injury may occur while participating in any fitness activity, such as muscle sprains, strains, broken bones, heat prostration, knee, foot or back injuries, heart attacks, strokes and any other mental or physical damage or death or disability.

I understand that it is my responsibility to consult with a physician prior to and regarding my participation in this walking clinic.

I consider myself physically able to participate and by continuing my participation, I will assume those risks and results.

I agree to inform the Instructor of any physical limitations, physical discomforts and/or injuries before, during or after my participation in this activity, and I take full responsibility for non-disclosure.

\*Participation Medically Approved \_\_\_\_\_(initial)      Name of doctor \_\_\_\_\_

\*Medical Approval Not Sought \_\_\_\_\_(initial)

### Waiver of Claim of Negligence:

I understand and agree that due to the unpredictability of injury occurring in the physical activities of the Walking Clinic, any claim of injury occurring due to perceived negligence on the part of the Instructor or the Huntley Community Association is waived.

**Acknowledgment** - I Acknowledge and Agree to this release and I understand its contents. I am aware that this is a release of liability and a contract between myself and Peter Fischer ("Instructor") and the Huntley Community Association and I sign it of my own free will.

Signature: \_\_\_\_\_      Date: \_\_\_\_\_