

Venetia Community Fitness Center Agreement, Liability Waiver, and Consent Form

Name:			
Name:			
Homeowner Address:			
City:	State: _		Zip:
Phone 1:		Phone 2:	
Please check one:	Homeowner	Guest	Tenant
If you are a guest, provide	resident's name _.		
If you are a tenant, attach o	copy of lease.		
Community Fitness Cent	ter, I, the abo liability for any i	ve-mentioned re njury I sustain thr	t provided in the Venetia sident, acknowledge and ough or while using any of
•	de by them. I i	understand that v	tions for use of the Fitness riolation of these rules and itness Center.
informed that it is in my	best interest to lous activity, in c	consult a physic order to determine	rsical distress. I have been ian prior to beginning any if I have any condition that oment.
liability, claims, demands, a illness, attorney's fees or land all activities at the Veharmless the Venetia Ma	actions and caus harm of any nat enetia Communi aster Association by me, my famil	ses of actions what ure to me or my ty Fitness Cente n and all its me y, estate, heirs o	members from any and all atsoever for any loss, injury, property arising out of any r. I further agree to hold mbers from all injuries or r assigns arising from or in
I, being at least eighteen (to all the terms and condition			ead, understand and agree
Signature:		 	Date:
Signature:			Date: