



Name: _____ Email: _____

Address: _____ City: _____ Zip: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

PARTICIPATION AGREEMENT AND INDEMNIFICATION
TOTAL SPORTS FACILITY
880 Elmgrove Road, Rochester, New York

My name is _____ and I reside at _____

I understand and hereby affirm relative to my participation in any activity that involves physical exercise or exertion that I am to follow the advice of my personal physician, including any restrictions, recommendations or instructions which my personal physician has provided. I am freely and voluntarily participating in physical activity which involves physical exercise and/or exertion at the Total Sports Facility (including the fitness center) located at 880 Elmgrove Road, Rochester, New York.

I, on behalf of myself, my beneficiaries, heirs and assigns covenant and agree to indemnify, protect, defend and save harmless Total Sports Experience, LLC, their agents, representatives, employees (former, current or future employees), members, officers, directors, officials, successors and/or assigns from and against any and all damages, losses, charges, liabilities, obligations, penalties, claims, litigation, demands, defenses, judgments, suits, actions, proceedings, costs, disbursements, and/or expenses, including, without limitation, all reasonable attorneys' fees, which may now or in the future be undertaken, suffered, paid, awarded, assessed, imposed, asserted or otherwise incurred by Total Sports Experience, LLC, their agents, representatives, employees (former, current or future employees), members, officers, directors, officials, successors and/or assigns relating to, resulting from or arising out of my use and/or participation at the Total Sports Facility (including the fitness center) located at 880 Elmgrove Road, Rochester, New York, including but not limited to any loss or liability to my person or property, or to that of any other person or property.

Photography and Video Recordings

Photographs and/or video are occasionally taken of program and event participants at Total Sports Experience. These photographs are used to promote future programs and events. If you prefer that you or your child not be included, please notify the photographer.

Dated: _____

Print name

Sign name (parent if under the age of 18)