



PHYSICAL FITNESS AND CONDITIONING FOR COMPETITIVE ATHLETES
PARTICIPATION ASSUMPTION OF RISK
(student must read carefully and sign before participating)

I am aware playing/participating in this Fitness and Conditioning Class can be dangerous in nature and involves MANY RISKS OF INJURY. I understand the dangers and risks of playing or practicing in this class include, but are not limited to, death, serious neck and spinal injury, injury to virtually all bones, joints, ligaments, muscles, tendons, and other aspects of the muscular skeletal system, serious injury to virtually all internal organs, and serious injury or impairment to other parts of my body, general health and well-being. I understand the dangers and risks of playing or participating in the above class may result not only in serious injury, but in a serious impairment of my future abilities to earn a living, to engage in other business, social and recreational activities, and generally to enjoy life.

Because of the dangers of participation in this class, I recognize the importance of following instructions regarding playing techniques and rules, etc., and agree to obey such instructions.

In consideration of Citrus College permitting me to participate in "Physical Fitness and Conditioning for Competitive Athletes" class and to engage in all activities related to the class, including, but not limited to, warm-up and class activity, I hereby assume all risks associated with participation and agree to hold Citrus College, its employees, agents, representatives, instructors, and volunteers harmless from any and all liability, actions, causes of action, debts, claims or demands of any kind and nature whatsoever which may arise by or in connection with my participation in any activities related to the Citrus College. The terms hereof shall serve as a release and assumption of risk for my heirs, estate, executor, administrator, assignees, and for all members of my family.

I have read and understand the risks as detailed above for this class:

Signature of Participant: _____

Date: _____

Print Name of Participant: _____

Signature of Parent or Guardian (if participant is under 18):
