



## 2018 County Wide Fitness Challenge

### Registration and Release Form

Name: \_\_\_\_\_

Age:  12 and under  46-55  
 13-18  56-65  
 19-35  66-75  
 36-45  Over 75

T-shirt size: (Please circle one)

Adult size: Sm Med Lg XLg XXLg XXXLg

Children size: Sm Med Lg

Address: \_\_\_\_\_

Village/Town: \_\_\_\_\_ Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

How did you hear about the fitness challenge? \_\_\_\_\_

I acknowledge that the Vulcan County Health and Wellness Foundation are not responsible for any health related risks associated with my participation in the Fitness Challenge. I release Vulcan County Health and Wellness Foundation and all of its employees or volunteers from any liability associated with my participation in the Fitness Challenge. I further acknowledge that my participation in the Fitness Challenge is purely voluntary and that the Fitness Challenge is a recreational activity. Any suggested activities or bonus points are undertaken at your own risk. If I have any health concerns I will seek advice from my family physician before making changes to my levels of physical activity.

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Signature of **parent/guardian** if participant is under 18: \_\_\_\_\_

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