

Athlete Activity Questionnaire

Name: _____ Todays Date: _____

Address: _____ City _____ State _____ Zip _____

Phone: _____ Alt. Phone: _____

Age: _____ DOB: _____ Gender: Male / Female

Athlete T-Shirt Size: _____

Emergency Contact: Name _____ Phone Number: _____

Primary Physician: _____ Phone: _____

Common sense is your best guide when you answer these questions. Please read the questions carefully and answer each one honestly

Yes No 1.) Has a doctor ever said that you have a heart condition AND that you should only do physical activity recommended by a doctor?

Yes No 2.) Do you feel pain in your chest when you do physical activity?

Yes No 3.) In the past month, have you had chest pain when you are not doing physical activity?

Yes No 4.) Do you lose your balance because of dizziness, or do you ever lose consciousness?

Yes No 5.) Do you have a bone or joint problem that could be made worse by a change in your physical activity?

Yes No 6.) Is your doctor currently prescribing drugs (for example, water pills) for your blood pressure or heart condition?

Yes No 7.) Do you know of any other reason why you should not do physical activity?

Please list any type of medications, injuries or health problems: _____

Continue 

LEOSTRENGTH & LIBERTY BARBELL
EXERCISE PROGRAM WAIVER AND RELEASE
WAIVER AND RELEASE, ASSUMPTION OF RISK AGREEMENT, AND
PARENTAL INDEMNIFICATION AGREEMENT

In consideration of me being permitted to participate in any way in the *Leo Strength & Performance LLC. / Liberty Barbell / Jonathan Leo* Personal Training Activities (“Activity”), I agree:

1. I understand the nature of **Powerlifting, Strength & Conditioning or Personal Training** activities and believe I am qualified to participate in such Activity. I further acknowledge that I am aware the activity will be conducted at my home or in a studio during the Activity. I further agree and warrant that if at any time I believe conditions to be unsafe, I will immediately discontinue further participation in the Activity.
2. I FULLY UNDERSTAND that: (a) Strength & Conditioning and Personal Training Activities involve risks and dangers of **SERIOUS BODILY INJURY, INCLUDING PERMANENT DISABILITY, PARALYSIS, AND DEATH** (“Risks”); (b) these Risks and dangers may be caused by my own actions, or inaction’s, the actions or inaction’s of others participating in the Activity, the condition in which the Activity takes place, or THE NEGLIGENCE OF THE “RELEASEES” NAMED BELOW; (c) there may be other risks and social and economic losses either not known to me or not readily foreseeable at this time; and **I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES** incurred as a result of my participation in the Activity.
3. **I HEREBY RELEASE, DISCHARGE, COVENANT NOT TO SUE, AND AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS** *Leo Strength & Performance LLC. / Liberty Barbell / Jonathan Leo*, any respective administrators, directors, agents, officers, volunteers, and employees, other participants, any sponsors, advertisers, and if applicable, owners and lessors of premises on which the Activity takes place (each considered one of the “Releasees” herein) from all liability, claims, demands, losses, or damages on my account caused or alleged to be caused in whole or in part by the negligence of the “Releasees” or otherwise, including negligent rescue operations and further agree that if despite this release, I, or anyone on my behalf claims any of the Releasees named above, **I WILL INDEMNIFY, SAVE AND HOLD HARMLESS EACH OF THE RELEASEES FROM ANY LITIGATION EXPENSES, ATTORNEY FEES, LOSS LIABILITY, DAMAGE OR COSTS ANY MAY INCUR AS THE RESULT OF ANY SUCH CLAIM.**

I HAVE READ THIS AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND HAVE SIGNED IT FREELY AND WITHOUT ANY INDUCEMENT OR ASSURANCE OF ANY NATURE, AND INTEND IT TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW AND AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID THAT THE BALANCE, NOTWITHSTANDING, SHALL CONTINUE IN FULL FORCE AND EFFECT.

Printed Name of Participant

Signature of Participant

Date

Printed Name of Witness

Signature of Witness

Date

PARENTAL CONSENT AND INDEMNIFICATION AGREEMENT

I, the minor’s parent and/or legal guardian, understand the nature of the above-referenced activities and the minor’s experience and capabilities and believe the minor to be qualified to participate in such “activity.” I hereby release, discharge, covenant not to sue, and AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS each of the Releasees from all liability, claims, demands, losses, or damages on the minor’s account caused or alleged to have been caused in whole or in part by the negligence of the Releasees or otherwise, including negligent rescue operations, and further agree that if despite this release, I, the minor, or anyone on the minor’s behalf makes a claim against any of the above Releasees, I WILL INDEMNIFY, SAVE AND HOLD HARMLESS each of the Releasees from any litigation expenses, attorney fees, loss liability, damage, or cost any Releasees may incur as the result of any such claim.

Printed Name of Parent/Guardian

Signature of Parent/Guardian

Date