



2024 YOUTH/TEEN (10-15 yrs) Summer Fitness Program

Registration Form

Session 1:– Tuesdays June 4 - 25 | Session 2:– Tuesdays July 16-August 13

Full Summer: Tuesdays June 4 - August 13

ALL CLASSES RUN 9:15-10:15am

Name _____ Address _____

Age _____ Grade (2021-22) _____ Email Address _____

Session Choice(s) _____ Session 1(\$89/\$99) _____ Session 2(\$89/\$99) _____ Full summer(\$169/\$189)

Parent/Guardian Names _____ Pickup Approved for _____

Home Phone _____ Cell Phone _____

Pay and turn in registration at the River Valley Athletic Club front desk OR mail "Attn: Allyson Czaja, 1826 Northwestern Ave. Stillwater, MN 55082". Make checks payable to "River Valley Athletic Club".

Please call (612) 272-4642 or email Allyson@rivervalleyathleticclub.com with any questions or concerns.

We really look forward to working with your kids!

Waiver and Release. I acknowledge and agree that: By signing this document, I declare that I have no known medical problems that would preclude my participation in the Program, and the information provided to River Valley Athletic Club (RVAC) regarding my medical history and physical condition is, to the best of my knowledge, true and correct. My Participation in RVAC program is voluntary and I assume all risk of injury or contraction of any illness or medical condition that may result, or the aggravation of any pre-existing medical condition I may have, or any damage, loss or theft of any personal property resulting or arising out of my participation in the Program. I understand and acknowledge that RVAC has no expertise in diagnosing, examining or treating any medical condition, whether existing or incurred as a result of my participation in the RVAC program. I understand and acknowledge that RVAC has made no guaranty of success or improvement as a result of my participation in the program. I hereby, on behalf of myself, personal representatives, heirs, executors, administrators, agents and assigns, forever release and discharge RVAC, its affiliates, employees, agents, representatives, successors and assigns from any and all claims or causes of action (known or unknown) that I may now have or will have in the future as a result of RVAC's negligence. This waiver and release of liability includes, but is not limited to, injuries that result from (a) use of any exercise equipment or facilities provided by RVAC; (b) use of any exercise equipment or facilities which may malfunction, (c) RVAC's improper maintenance of any exercise equipment or facilities, (d) any negligent instruction or supervision provided by RVAC, and (e) any injuries which occur because of slipping and falling while on RVAC's premises or equipment.

I HAVE CAREFULLY READ THIS WAIVER AND RELEASE AND FULLY UNDERSTAND THAT IT IS A COMPLETE RELEASE OF LIABILITY. THAT I HEREBY WAIVE ANY RIGHT THAT I MAY NOW HAVE OR WILL HAVE TO BRING ANY LEGAL ACTION AGAINST River Valley Athletic Club, its EMPLOYEES, AGENTS, SUCCESSORS OR ASSIGNS, FOR ANY LIABILITIES THAT MAY RESULT, WHETHER DIRECTLY or indirectly from RVAC's negligence.

Parent Guardian Signature _____ Date _____