



2875 Boardwalk Drive ATHLETIC CLUB Ann Arbor MI 48104
734-761-4440 www.1on1club.com (FAX) 734-761-7646

4/14/07

To: Parents/Guardians
Fm: One On One Athletic Club

Minor Participant Form

Minor Name: _____

Age: _____

Date: _____

This form must be read and signed before participation in all children's activities at One On One Athletic Club.

I, the parent/guardian of _____ understand that due to the physical aspect of One On One Athletic Club's program, that there is a chance of injury even though all necessary precautions are taken by the staff. I hereby release and discharge One on One Athletic Club, its Owners, directors, officers, employees and agents from all claims, damages, demands, or causes of action, both present' and future, which may occur during or as a result of my child's exercise and/or wellness program at One On One Athletic Club. I agree to indemnify One On One Athletic Club for any and all such claims, damages, and demands including costs, expenses and attorney's fees for defending such claims.

I grant permission for One On One Athletic Club to use any photographs of my child taken during the time in which my child uses the facility for promotional purposes.

Yes _____

No _____

Parent/Guardian Signature: _____

Emergency Name: _____

Emergency Phone: _____