



1 WEEK GUEST PASS

ASSUMPTION OF RISK AND RELEASE

I understand the risk of injury from CLUB activities and using any CLUB equipment is significant, including the potential for permanent paralysis and death. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, I acknowledge that this is an UNSUPERVISED FITNESS CENTER and I assume all risks associated with using exercise equipment and exercising alone without the aid and presence of CLUB staff on the premises. I understand that Titan Fitness is independently owned and operated by Titan Fitness, LLC- Peoria. I HEREBY RELEASE, INDEMNIFY, AND HOLD HARMLESS Titan Fitness. WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, LOSS OR DAMAGE to person or property that may arise out of or in connection with my use of any of the equipment or the facility, or any incident that occurs while using this facility, or otherwise related to my membership.

I expressly agree that this release is intended to be as broad and inclusive as permitted by applicable law and if a portion of this release is held invalid, the balance shall remain in full force and effect. This release shall apply to my heirs, assigns, personal representatives and any other next of kin. I understand that the Titan Fitness is relying on this release in agreeing to enter into this Agreement.

I HAVE READ THE RELEASE OF LIABILITY AND ASSUMPTIONS OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS AND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

Address _____ Phone _____

Print Name _____ Key Tag # _____

Signature _____ Date _____

Parent (Legal Guardian) Signature _____ Date _____

Staff Signature _____ Date _____