

# BOOT CAMP

## Registration Form

Community	Days (AM) Days (PM)	Time (AM) Time (PM)	Cost (See website)	Program Start Date (See website)	Check Community
Beverly	Mon-Thurs NA	6-7am NA			
Danvers	Mon-Thurs Tues&Thurs	5:30-6:30am 6-7pm			
Salem	Mon-Thurs Mon&Wed	6-7am 6:30-7:30pm			
Swampscott	Tues&Thurs NA	9-10am			
Marblehead	Mon-Thurs NA	5:30-6:30am NA			
Topsfield	Mon-Thurs NA	5:30-6:30am NA			
Manchester	Mon-Thurs NA	6-7am NA			
Georgetown	Mon-Thurs Tues&Thurs	6am-7am 6pm-7pm			
Corporate/Private Boot Camp (You fill in info.)					

**\*\*PLEASE NOTE: DAY'S, TIME AND LOCATION ARE SUBJECT TO CHANGE. PLEASE CHECK THE WEBSITE FOR UPDATED INFORMATION.**

Cost: \_\_\_\_\_ T-Shirt Size: (new members only) Sm \_\_\_ Med \_\_\_ LG \_\_\_ XLG \_\_\_ XXLG \_\_\_  
 Add \$5 for tech shirt: (Yes) (No) NEW Member: (YES) (NO) (Just returned from LONG hiatus)

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

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone # \_\_\_\_\_ Emergency # \_\_\_\_\_

Email (*print CLEAR*) \_\_\_\_\_

How did you hear about this program?  
 \_\_\_\_\_

What are your program goals? (*be specific*) \_\_\_\_\_  
 \_\_\_\_\_

Please list any physical limitations/concerns: \_\_\_\_\_  
 \_\_\_\_\_

**AMOUNT PAID:** \_\_\_\_\_

Cash \_\_\_\_\_ Check# \_\_\_\_\_ On-Line/Rec Dept: \_\_\_\_\_ (*where applicable*)

**Please make check payable to:**

**B&S Fitness Programs, LLC**

15 Maple St.

Salem, MA 01970



# BOOT CAMP

## WAIVER AND RELEASE OF LIABILITY -- \*READ BEFORE SIGNING

In consideration of being allowed to participate in any way in one of B&S Fitness Programs/North Shore Boot Camp Company fitness programs and/or any of the related events and activities that either they, their associates, and/or member of the B&S Fitness Programs/North Shore Boot Camp Company coaching staff or instructors conducts, I, \_\_\_\_\_(name of participant), the undersigned, acknowledge, appreciate, and agree that:

1. There is risk of injury from the activities involved in these programs, including the potential for permanent paralysis and death, and while particular skills, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist; and,
2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and,
3. I willingly agree to comply with the stated and customary terms and conditions for participation. If, however, I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of B&S Fitness Programs LLC/North Shore Boot Camp Company, their associates and/or any member of the training staff immediately; and,
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE, INDEMNIFY, AND HOLD HARMLESS B&S Fitness Programs/North Shore Boot Camp Company, the coaching staff, family members, associates, agents and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and, if applicable, owners and lessors of premises used for the activity ("Releasees"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property associated with my presence or participation, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law. I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

Name of Program: \_\_\_\_\_ Community: \_\_\_\_\_ Date of Program: \_\_\_\_\_

x \_\_\_\_\_ Age: \_\_\_\_\_ Date Signed: \_\_\_\_\_  
PARTICIPANT'S SIGNATURE

### FOR PARENTS/GUARDIANS OF PARTICIPANTS OF MINORITY AGE

This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above of all the Releasees, and, for myself, my child and our heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the Releasees from any and all liabilities incident to my minor child's involvement or participation in these programs as provided above, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES, to the fullest extent permitted by law.

x \_\_\_\_\_ Date Signed: \_\_\_\_\_

PARENT/GUARDIAN'S SIGNATURE (print name)

**Please return this signed waiver with your registration form above:**

B&S Fitness Programs, 15 Maple Street, Salem, MA 01970  
*Or on the first day of Boot Camp.*

Questions? Contact Brandi Dion (978) 204-8588 or [BnSFitness@yahoo.com](mailto:BnSFitness@yahoo.com)

Our Websites:

[BnSFitness.com](http://BnSFitness.com) \* [NorthShoreBootCamp.com](http://NorthShoreBootCamp.com) \* [BnSSportScience.com](http://BnSSportScience.com)