

# WELCOME TO THE VALLEY!

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Sponsoring Member's Name: \_\_\_\_\_

## RELEASE AND WAIVER OF LIABILITY

In consideration of being permitted to utilize the facilities, services and programs of The Valley Athletic Club LLC ("The Valley") for any purpose including, but not limited to, observation or use of facilities and equipment and participation in any program affiliated with The Valley without respect to location, I, on behalf of myself and any dependents or personal representatives, hereby:

1. Acknowledge that I have (a) read this release and waiver of liability; (b) had the opportunity to inspect The Valley's facilities and equipment or will immediately upon entering or participating will inspect and carefully consider such premises, facilities or program; (c) accept the facilities, equipment and program as being safe and reasonably suited for the purposes intended and (d) voluntarily sign this release and waiver of liability.

2. Release The Valley, its directors, officers, employees, agents and volunteers (collectively "The Valley Releasees") from all liability to me for any loss or damage to property or injury or death to person, whether caused by the ordinary negligence of The Valley Releasees, or any other person, while I am in, upon or about The Valley or any facilities or equipment therein or participating in any program or service affiliated with The Valley.

3. Agree not to sue The Valley Releasees for any loss, liability, damage, injury or death described above and I agree to indemnify and hold harmless The Valley Releasees and each of them from any loss, damage or cost they may incur due to my presence in, upon or about The Valley or any facilities or equipment therein or my participation in any program or service affiliated with The Valley whether caused by the ordinary negligence of The Valley Releasees or by any other person. I assume full responsibility for the risk of such loss, liability, damage, injury or death.

I intend for this release and waiver of liability to be as broad and inclusive as is permitted by the laws of the State of Washington. If any portion hereof is held invalid, I agree that the balance shall continue in full force and effect.

I have received a copy of The Valley Athletic Club Guest Policy \_\_\_\_\_ Initial  
Signature: \_\_\_\_\_

## STAFF USE ONLY

Adult  Youth (*Youth under 18 years must have adult signature*)

Sponsored: Y/N Fee\$: \_\_\_\_\_

Charged to acct name: \_\_\_\_\_

Cash  Check  Card # \_\_\_\_\_ Exp \_\_\_\_\_

Completed and Charged: Staff Initials: \_\_\_\_\_

D.L. #: \_\_\_\_\_

Prospect ID: \_\_\_\_\_

