



Fitset Ninja
11511 120th Street
780.455.4442
hello@fitsetninja.com

NOTIFICATION OF RISK

Participants Informed Consent Form

PARTICIPANTS NAME:

EMERGENCY CONTACT INFORMATION

LAST NAME: _____ CONTACT: _____

FIRST NAME: _____ PHONE: _____
or
PHONE: _____

RISK:

I, _____ give my consent for my child _____.
(Print Parent's full name) (Print Child's full name)

to participate in obstacle fitness programs **understanding that participation in a program offered by FITSET NINJA may result in personal injury** (including but not limited to Injury to internal organs, bones, joints, ligaments, muscles, tendons and other aspects of the skeletal system and paralysis or brain damage) **and property damage or loss**. I fully understand these risks and give my son/daughter permission to participate in the programs offered by **FITSET NINJA**

RULES:

I understand that the rules and regulations are designed for the safety and protection of participants and hereby agree to inform my son/daughter of the importance of abiding by the rules and regulations set down by **FITSET NINJA**

Parents/Guardian Signature: _____ Date: _____

Name: _____

Email Address: _____

.