



Healthtrax Fitness & Wellness

SWIM REGISTRATION FORM

(PLEASE PRINT)

Name of Swim Group _____

Registrant Name

Age

DOB

Parent or Guardian (if under 18) _____

Address _____

City _____ State _____ Zip _____

Email _____

Phone (H) _____ (W/C) _____

Emergency Contact _____ Phone _____

Healthtrax member: YES / NO

I am interested in receiving a FREE 2 week Healthtrax Family Membership: YES / NO

Best Way to contact me: EMAIL / PHONE

By signing this waiver of liability and assumption of risk agreement, registrant, parent/legal guardian authorizes the above mentioned registrant to use Healthtrax Fitness & Wellness and acknowledges and accepts the risks inherent in the use of center services, apparatus, appliances, facilities activities and voluntarily and expressly assumes the risk of injury, accident, death, loss, cost, or damage to the registrant to their property which might arise from use of the center or its services, facilities, apparatus, equipment or activities and releases the center, its directors, officers, shareholders, representatives, agents and employees from all claims, liabilities, loss, damages, costs and or causes of action including but not limited to all bodily injuries and property damage whether or not it is contended the center, its agents, representatives or employees or their negligence contributed thereto in whole or in part, or was responsible therefore.

Signature further certifies that the participant is in good health and is able to undertake and engage in physical exercise sport activities in which he or she chooses to participate. Signature assumes all responsibility for updating club of changes in physical condition and for reporting all injuries sustained at the club to the manager or safety director, and releases the club, its directors, officers, shareholders, representatives, agents and employees from any liability arising out of said information.

Signature of applicant _____

Parent or Guardian Signature (if under 18) _____

Date _____

8300 Health Park, Raleigh, NC 27615
(919) 847-2393
www.healthtrax.com