

ATHLETE INTAKE QUESTIONNAIRE



CONTACT & GENERAL INFO

Name: _____

Age: _____ Phone: _____

Email: _____

Address: _____

City: _____ State: _____

Emergency Contact: _____ Emergency Phone: _____

AGENT INFORMATION *(if applicable)*

Agent Name: _____

Agency: _____

Phone: _____

Email: _____

SPORT & TRAINING

Sport/s Played: _____ Position/s: _____

What are your training goals? _____

What types of exercise do you participate in or enjoy? _____

How many times a week do you currently exercise? _____

HEALTH HISTORY

Have you ever been diagnosed with a heart condition? Yes No

Do you experience chest pain during physical exertion? Yes No

Do you have high or low blood pressure? Yes No

Do you have asthma or other respiratory issues? Yes No

Do you have diabetes or any metabolic diseases? Yes No

Have you ever had surgery or serious injury? Yes No If yes, please describe surgery/injury and provide date:

Do you have any known allergies? Yes No If yes, please list: _____

Are you currently on any medications? Yes No If yes, please list: _____

Do you have any joint or muscle problems that could be aggravated by exercise? Yes No If yes, please describe: _____

Are there any other medical conditions or physical limitations we should be aware of? _____

CONSENT

I, the undersigned, affirm that the information provided above is accurate to the best of my knowledge. I understand that it is my responsibility to consult with a physician prior to participating in any exercise program.

Print Name: _____ Date: _____

Signature: _____

Assumption of Risk, Waiver, and Release from Liability

In consideration for the use of the property, facilities and/or services of LB Brands and its affiliated companies (the "**Company**"), including any travel thereto, the undersigned agrees as follows:

Initial Here

- _____ 1. **RISK FACTORS.** The undersigned understands and acknowledges that the use of equipment, facilities and training provided by the Company, and any other programs and services sponsored by the Company and/or activities occurring in Company's facilities (the "**Activity**"), involves risk, including but not limited to risk of property damage, bodily injury and possibly death. These risks may result from the use of equipment or facilities, from training or activities, from the acts of others, from organization of an act or from the unavailability of emergency medical care.
- _____ 2. **ASSUMPTION OF RISK.** The undersigned hereby assumes all risks that are foreseeable and involved with or arise out of the use of the Activity, the acts of others, omission of an act or the unavailability of emergency care, including but not limited to those risk factors described in Section 1 above; provided, however, that the undersigned does not assume the risk for any injuries caused by the sole or gross negligence, or willful or wanton misconduct on behalf of any members, managers, officers, employees, agents, representatives, or volunteers of the Company.
- _____ 3. **ACKNOWLEDGEMENT OF POLICIES AND PROCEDURES.** The undersigned hereby acknowledges knowing and understanding all policies and procedures relating to the Activity and understands that safe and proper participation in the Activity is dependent upon carefully following such policies and procedures.
- _____ 4. **PREREQUISITE SKILLS AND TRAINING.** The undersigned hereby acknowledges that he or she has the requisite skills, qualifications, physical ability and training necessary to properly undertake the Activity.
- _____ 5. **RELEASE.** The undersigned hereby releases Company and all of its present and former affiliates, members, managers, offices, employees, attorneys, agents, representatives, successors and assigns from and against any and all claims, demands, actions, causes of action, controversies, injuries, damages, losses, costs, expenses (including reasonable attorneys' fees) or liabilities of any and all kinds, whether known or unknown, arising under or in any manner relating to the Activity, including but not limited to those based on death, bodily injury, or property damage, whether or not caused by negligence or other fault of the parties being released.
- _____ 6. **WAIVER.** The undersigned hereby waives the protection afforded by any statute or law in any jurisdiction whose purpose, substance and/or effect is to provide that a general release shall not extend to claims, material or otherwise which the person giving the release does not know or suspect to exist at the time of executing the release. This means, in part, that the undersigned is releasing unknown future claims.
- _____ 7. **IDEMNIFICATION.** The undersigned hereby agrees to indemnify, defend and hold harmless the Company and of its present and former affiliates, members, managers, officers, employees, attorneys, agents, representatives, successors and assigns (collectively, "**Indemnitee**") from and against any and all claims, demands, actions, causes of action, controversies, injuries, damages, losses, costs, expenses (including reasonable attorneys' fees) or liabilities arising under or in any manner relating to the Activity, including but not limited to damages to or destruction of any property of the Indemnitee or any others, injury or death to the undersigned or anyone else.
- _____ 8. **PROPERTY DAMAGE.** The undersigned hereby agrees to pay for any and all damages to any property caused by the undersigned negligently, willfully or otherwise.
- _____ 9. **REPRESENTATIVES.** The undersigned enters into this agreement for him/herself, his/her heirs, assigns and legal representatives.
- _____ 10. **CONSENT FOR EMERGENCY TREATMENT.** The undersigned, as a participant in the Activity, hereby consents to medical treatment in a medical emergency where the undersigned is unable to consent to such treatment.
- _____ 11. **INSURANCE.** The undersigned understands that Company does not carry participant insurance. The undersigned is encouraged to have a medical physical examination and purchase health insurance prior to any and all participation in the Activity.
- _____ 12. **ACKNOWLEDGEMENT.** The undersigned has read and understands this agreement and realizes it relates to surrendering and releasing valuable legal rights and does so freely and voluntarily.

Signature: _____ Date: _____

Print Name: _____

Parent/Legal Guardian Signature (if under 18): _____ Date: _____

MEDIA RELEASE

For valuable consideration received, I hereby give PMR Performance LLC and its agents and employees the absolute and irrevocable right and permission, with respect to the photographs/images/video and logos:

To use, re-use, publish and re-publish the same in whole or in part, individually or in conjunction with other photographs/video, in any medium including (but not by way of limitation) illustration, promotion and advertising and trade.

Print Name

Signature

Date

Signature of Parent or Guardian (if under age 18)

Date