

# YMCA "Y Lose It" Registration Form

(\*Required information)

\*Name \_\_\_\_\_ Male \_\_\_ Female \_\_\_ YMCA Staff/Family

\*Address \_\_\_\_\_

\*E-Mail address \_\_\_\_\_

Please check the best way to contact you:

E-mail  Cell Phone \_\_\_\_\_

Work Phone \_\_\_\_\_  Home Phone \_\_\_\_\_

Shirt Size (Please circle) S M L XL 2X 3X 4X

In case of emergency, please contact:

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Phone (best contact) \_\_\_\_\_

I understand that rigorous exercise, physical training, conditioning, and other recreational activities can be dangerous and involve the risks of injury and death. I understand that these risks include, but are not limited to, loss of control, use of training facilities, exercise programs, exercise equipment, training aids, and any information construed as advice. Despite the risks involved with exercise and in consideration of being allowed to participate in exercise, **I AGREE TO EXPRESSLY ASSUME ALL RISKS OF INJURY OR DEATH** that might be associated with the training and the use of the facilities of the Family YMCA of Northwest Illinois, including but not limited to, the use of equipment and participation instruction special events, and participating beyond the supervised area (collectively referred to as "use of the facilities"). Furthermore, to the fullest extent allowed by law, **I AGREE NEVER TO SUE AND TO RELEASE FROM LIABILITY** The Family YMCA of Northwest Illinois for any damage, injury or death to me arising from participation in the program or use of the facility, regardless of cause, including the NEGLIGENCE OF The Family YMCA of Northwest Illinois. **I UNDERSTAND THIS IS A RELEASE OF LIABILITY THAT IS VALID FOREVER.** I understand that this Release of Liability will prevent me or my heirs from filing suit or making any claim for damages in the event of injury or death to me arising out of participation in the program or use of the facilities. Additionally, in the event I, my heirs, the user, my legal representative, or any other person acting on my behalf files a lawsuit arising out of my participation in the program or use of the facilities, **I AGREE TO DEFEND, INDEMNIFY AND HOLD HARMLESS** The Family YMCA of Northwest Illinois for damages, attorney's fees, or costs associated with or arising out of such a lawsuit. With a complete and full understanding of this **RELEASE OF LIABILITY AND EXPRESS ASSUMPTION OF RISK AGREEMENT**, I nevertheless enter into this agreement freely and voluntarily and agree that it is binding upon me, my heirs, assigns, legal representatives, and any other person acting on my behalf. I also agree to indemnify The Family YMCA of Northwest Illinois for any and all claims brought by a third party which arise from the participants or my participation in the program. I grant exclusive permission to The Family YMCA of Northwest Illinois to use my name, likeness, and photograph for the purpose of publicity, public relations, editorial, or other advertising purposes without restriction as to frequency or duration.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_



## Contest Dates: March 5—May 14

Categories: Male, Female, YMCA Employee/Family Member

1st and 2nd Place Cash Awards in each category

Cost: YMCA Members—\$45.00; Program Members—\$90.00

Times for the initial and final weigh-ins: Monday, March 5 & Monday, May 14  
5:15—7:15 AM; 11:30 AM—1:30 PM; 5:30—9:00 PM

(Weigh-ins will take place in the trainer office in the Lower Level Health and Wellness Center)

- At your initial weight-in, you will receive a packet of information explaining all aspects of the contest.
- Register by February 25 to guarantee shirt size.
- Weigh-ins are to be done in shorts and T-shirts only, unless prior approval is given by program coordinators.

For more information, contact Wendy McGath, 815-235-9622 or Sandy Robertson, 815-656-4571

