MINOR (Under 18) GUEST FORM

DATE:	NAME (print):				
ADDRESS:					
CITY:		_STATE: _		_ ZIP:	
DATE OF BIRTH:/_	/		MALE	FEMALE	
HOME PHONE:	WORK PHONE:				
EMAIL:					
EMERGENCY CONTACT:			PHONE		

Assumption of risk agreement

In consideration of the above information and in consideration of the privilege of participating in the Meyer Wellness and Sports Center activities, the undersigned participant acknowledges the existence of risks in connection with these activities, assumes such risks, and agrees to accept the responsibility for any injuries sustained in the course of the use of the facilities and\or equipment. In addition, participant releases Southwest Baptist University, its trustees, officers, faculty, staff, students and agents from any liability for claims arising out of the use of exercise equipment, gymnasium including running track and climbing wall, racquetball courts, swimming pool, supervised or unsupervised exercise or activities, incidents occurring in the locker and shower rooms of the center.

The participant recognizes that possible injuries which may arise out of participation in the centers activities include, but are not limited to, potentially fatal injuries such as heart attacks, stroke and heat stress, as well as other injuries such as back injuries, broken bones, torn ligaments, etc. The participant releases Southwest Baptist University from liability for such injuries regardless of whether his or her damage or loss is caused by any negligent act or failure of the university or otherwise.

Southwest Baptist University reserves the right to restrict use of the Fitness, Racquetball, Gymnasium, Running Track, Climbing Wall, and Swimming Pool areas in instances where the member has a history of health problems that would render the member unable to participate in aspects of the centers programs and activities. All decisions concerning restricted use will be made by the university after consultation with the members physician.

The participant acknowledges the existence of need for certain rules concerning the use of equipment and facilities. Participant agrees to abide by those rules and make every effort to assure the equipment and facilities are kept in safe and useable condition.

Having read the preceding the participant acknowledges an understanding of those risks set forward and knowingly agrees full responsibility for any exposure to such risks. I understand that this membership is non-refundable and non-transferable.

Date: Parent/Legal (Guardian Signatı	ure:				
***Parent/legal guardian release form must be signed- see back						
Guest of WSC member:						
Price: \$5.00 Method of Payment	Cash	Check				
WSC Staff Signature:						

PARENT/LEGAL GUARDIAN RELEASE FOR MINOR

By signing this document, you are waiving certain legal rights. Read carefully before signing.

I hereby represent that I am the parent or legal guardian of, "PARTICIPANT",					
who is under the age of 18. For and in consideration of PARTICIPANT to participate voluntarily in any activity of following activities areas: gymnasium, climbing wall, run pool, fitness room, and aerobics room, and all other facithe risks associated with the Meyer Wellness and Sport Southwest Baptist University, its trustees, officers, facult claims, demands, suits, causes of action, or judgments have, or may have in the future or which our heirs, exect have, or claim to have against Southwest Baptist University at agents arising out of or in any way connected the suit of the	r event, including but not limited to the ining track, racquetball courts, swimming lities and activities, I hereby assume all s Center and activities. I release ty, staff, students, and agents from all which PARTICIPANT, or I ever had, now eutors, administrators, or assigns may resity, its trustees, officers, faculty, staff, cted with the Meyer Wellness and yn or unknown, property damages, or S, OR NEGLIGENCE of Southwest				
I agree to indemnify and hold harmless Southwest Baptifaculty, staff, students, or agents, from all claims, demargingments which PARTICIPANT or I ever had, now have heirs, executors, administrators, or assigns may have, or Baptist University, its trustees, officers, faculty, staff, studing connected with the Meyer Wellness and Sports Cerknow or unknown, property damages, or claims for wrong OMISSIONS, OR NEGLIGENCE of Southwest Baptist Ustaff, students, or agents. I agree to pay all costs and at brought against Southwest Baptist University, its trustee agents.	nds, suits, causes of action, or e, or may have in the future or which our or claim to have against Southwest idents, or agents, arising out of or in any inter or activities, for all personal injuries, naful death, caused by the ACTS, University, its trustees, officers, faculty, torney's fees incurred if legal action is				
I also agree to be responsible for any property damage PARTICIPANT may cause by intentional or negligent at Meyer Wellness and Sports Center.					
I have read and executed this document with full knowle	edge of it legal significance.				
Signature of parent or legal guardian	DATE				