



**CrossFit 760**  
 6102 Avenida Encinas #H  
 Carlsbad, CA 92011  
<http://www.crossfit760.com/>

CF 760 Waiver

|                               |                                |                      |
|-------------------------------|--------------------------------|----------------------|
| <b>Full Name</b>              | <b>Email Address</b>           | <b>Gender</b>        |
| <input type="text"/>          | <input type="text"/>           | <input type="text"/> |
| <b>Street Address</b>         | <b>City</b>                    | <b>State</b>         |
| <input type="text"/>          | <input type="text"/>           | <input type="text"/> |
| <b>Country</b>                | <b>Date of Birth</b>           | <b>Zipcode</b>       |
| <input type="text"/>          | <input type="text"/>           | <input type="text"/> |
| <b>Emergency Contact Name</b> | <b>Emergency Contact Phone</b> | <b>Phone</b>         |
| <input type="text"/>          | <input type="text"/>           | <input type="text"/> |

**WAIVER OF CLAIMS AND RELEASE OF LIABILITY**  
**READ CAREFULLY-THIS AFFECTS YOUR LEGAL RIGHTS**

In consideration of being permitted to participate in the training and physical activities associated with the CrossFit training regimen, which includes intense weight training, cardio-vascular conditioning and endurance, conducted and organized by 760 Holdings, LLC of 316 California Avenue #317, Reno, Nevada 89509 or CrossFit 760, LLC and any owner, contractor, employee, coach, or CrossFit association, hereinafter collectively referred to as "CrossFit", and in recognition that CrossFit training is an inherently DANGEROUS ACTIVITY, Member/Participant and his/her personal representatives, guardians, assigns, heirs, and next of kin, hereinafter collectively referred to as "Member", hereby covenants not to sue, waives, discharges and releases and shall hold harmless CrossFit, its owners, instructors, and employees, from all liability to the Member, for all losses, damage, and any claim or damage therefore on account of any injury to the person or property or resulting permanent injury or death of the Member, or in contract, WHETHER CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OR STRICT LIABILITY OF CROSSFIT, ITS EMPLOYEES OR INSTRUCTORS OR OTHERWISE, WHILE MEMBER IS INVOLVED IN ACTIVITIES AT CROSSFIT OR ANY CROSSFIT RELATED FUNCTION, INCLUDING ANY INJURY INVOLVING EQUIPMENT FAILURES.

1. I agree to observe and obey all posted rules and warnings, and further agree to follow any oral instructions or directions given by CrossFit or its employees, representatives or agents.
2. I agree to indemnify and defend from suit CrossFit or any of its agents or assigns in the event of suit. I agree to waive, release, and forever discharge CrossFit, its officers, agents, employees and representatives against all claims, causes of action, damages, judgments, costs or expenses, including attorney fees and other litigation costs, which may in any way arise from my or my family's use of or presence upon the facilities and from any activity associated with any injury to me or my family's related to activities with CrossFit.
3. I agree to further release CrossFit, its owners, instructors, and employees from any claim of liability resulting from administering first aid treatment or service rendered to Member during his/her participation in CrossFit activities.
4. Member hereby agrees to personally provide for any medical expenses which may be incurred or necessitated as a result of any injury sustained while participating in any CrossFit class, during training at, or performing for or at CrossFit.
5. For promotional purposes, Member gives CrossFit 760 authorization to post on website photos of student and use any media/film production taken from the workout sessions and while at the premises of CrossFit 760.
6. Any legal or equitable claim that may arise from participation in the above shall be resolved under California law.
7. Please provide a medical release authorization from your physician if you have any known medical conditions that may affect you during physical activities.

I HAVE READ THIS DOCUMENT AND UNDERSTAND IT. I FURTHER UNDERSTAND THAT BY SIGNING THIS RELEASE, I VOLUNTARY SURRENDER CERTAIN LEGAL RIGHTS.

I agree to these terms.

**Family History of Heart Disease? \***

Yes  No

**Who and at what age?**

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**Do you currently exercise? \***

Yes  No

**How often?**

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**Are you on Medication? \***

Yes  No

**If so, which?**

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**Problems in your knees \***

Yes  No

**If so, what?**

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**Problems in your hip/ pelvis? \***

Yes  No

**If so, what?**

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**Problems in your low back/ neck/ shoulders? \***

Yes  No

**If so, what?**

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**Other Medical History? \***

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**Have you trained in CrossFit before? \***

Yes  No

**If so, where?**

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**What are your current goals? \***

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**Sign your name below:**

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Please read the [Electronic Records and Signature Disclosure](#)

I agree to use electronic records and signatures