Liability Waiver & Member Agreement

Member Information

Full Name: _____ **Date of Birth:** _____

Phone Number: _____ **Email:** _____

Emergency Contact: _____ **Emergency Contact Phone:** _____

I understand that participation in boxing, fitness training, and related activities at **Box Fit Inc** involves physical exertion and carries inherent risks, including the risk of serious injury. I voluntarily choose to participate and assume all risks associated with these activities.

I certify that I am physically capable of participating in the programs offered by Box Fit Inc. I agree to inform Box Fit staff of any medical conditions, injuries, or limitations that may affect my ability to safely participate.

I hereby release, waive, and hold harmless Box Fit Inc, its owners, coaches, employees, contractors, and affiliates from any and all claims, liabilities, injuries, damages, or losses arising out of or related to my participation, except as otherwise required by applicable law.

I understand that photographs and/or videos may be taken during classes, events, or training sessions and may be used by Box Fit Morgan Hill for marketing, advertising, and promotional purposes. I may opt out by providing written notice to Box Fit.

Member Agreement

By signing below, I agree to:

- Follow all gym rules and coach instructions.
- Conduct myself in a respectful and sportsmanlike manner toward staff and fellow members.
- Use equipment safely and report any damaged or unsafe equipment immediately.
- Understand that memberships, promotions, and class schedules are subject to Box Fit Inc policies and may change without notice.
- Accept full responsibility for my personal belongings while on the premises.

I acknowledge that I have read, understand, and voluntarily agree to the terms of this Liability Waiver and Member Agreement.

Member Signature: _____ **Date:** _____

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