

SKAGWAY RECREATION CENTER

WEIGHT ROOM / CARDIO ROOM EQUIPMENT USE WAIVER

For your child to use the weight room, if they are under the age of 18, this waiver must be signed by a parent or guardian and kept on file in the Skagway Recreation Center office.

WEIGHT/CARDIO ROOM WAIVERS ARE GOOD FOR ONE YEAR

WEIGHT & CARDIO ROOM REGULATIONS:

1. Anyone under the age of 14 may **NOT** use the weight room or cardio equipment.
2. Users under the age of 18 must have a signed waiver on file at the Skagway Recreation Center office.
3. All users must pay and sign-in prior to use of the facility.
4. No audible music allowed in weight room; however, headphones are allowed.
5. No gum, food, candy, or pop allowed in the weight room.
6. Appropriate clothing is required to be worn in the weight room. Shoes and shirt are required.
7. Spin Bike use is NOT allowed to anyone under the age of 16.
8. Anyone under the influence of alcohol and/or drugs will be restricted from entering the facility and will be asked to leave.
9. Any actions which are or may become hazardous to staff or patrons will not be tolerated, based on the judgment of staff.
10. Persons with communicable diseases, open wounds, sore or inflamed eyes (due to infection), or discharge of the mouth or ear(s) shall not use the weight room.
11. All equipment will be used as intended, weights re-racked, and equipment wiped down after use.

I, _____, give my permission for my child,
 (Name) _____, to use the weight room from
 (Begin Date) _____ to (End Date) _____.

I understand that a general weight & cardio room orientation is provided by SRC Staff. I understand that there is a certain amount of risk associated with weight & cardio exercise and I will teach my child proper exercise form and equipment use. I represent and warrant to *Municipality of Skagway – Skagway Recreation Center* that my child is in good physical health and able to engage in such physical activity. I have carefully read this waiver. I have signed the Participation Agreement & Liability Waiver and the Acknowledgement and Assumption of Risks and Release of Indemnity Agreement as part of this waiver process. I represent that the child I am authorizing to use the weight and cardio equipment has also signed the Acknowledgement and Assumption of Risks and Release and Indemnity Agreement with my permission and under my supervision.

In case of an emergency I can be reached at the following numbers:

Main Phone: _____ Alternante Phone: _____

Email: _____

Parent/Guardian Signature: _____ Date: _____

Participant: _____ DOB: _____ Date: _____