



CTU DANAO FITNESS GYM WAIVER

I, the undersigned, hereby acknowledge and understand that by using of the CTU Danao Fitness gym equipment and facility involves certain risks and potential dangers. By signing this waiver, I voluntarily assume all risks associated with the free utilization of the said university facility.

Full Name: _____

Course & Year: _____

Date of Birth: _____

Address: _____

Cellphone Number: _____

In case of emergency contact:

Name: _____

Cellphone No.: _____

Assumption of Risks:

I acknowledge that I am voluntarily availing of the free utilization of the fitness gym facility offered by CTU Danao Campus. I understand that physical exercise, by its very nature, carries with it certain inherent risks, including but not limited to physical injury, strain, discomfort, and even the possibility of serious injury or death. **I hereby assume all risks and responsibility for any such injuries or other medical incidents that may happen.**

Any damages incurred to any of the facilities and gym equipment may it be intentional or not, all expenses shall be shouldered and paid by the student concern.

Waiver and Release:

I hereby release, waive, discharge, and agree not to sue CTU Danao Campus, its employees, representatives and affiliates, from any claims, demands, liabilities, rights, damages, expenses, and causes of action of any nature arising out of or in connection with my utilization of the fitness gym facility whether caused by my own negligence or otherwise.

Medical Representation:

I represent that I am physically fit to use CTU Danao fitness gym facility and have no medical condition that would prevent my safe participation. If I have any medical conditions or concerns, I have consulted with a healthcare provider and obtained clearance to participate.

Acknowledgment:

I have read this Fitness Gym Waiver, understand its contents, and agree to be bound by its terms. I understand that I am giving up substantial legal rights by signing this document.

Signature: _____ Date: _____

Parent/Guardian (Signature over Printed Name): _____ Date: _____

