Grit Strength Fitness Liability Waiver

Child's Name: _____
Date of Birth: _____
Parent Name: _____
Phone: _____

1. Fitness Waiver & Safety

- **Risks:** I know that fitness training (exercises, games, drills) has risks like scrapes, strains, or falls. My child is healthy and able to safely participate.
- **Release:** I agree not to hold **Grit Strength Fitness, Somerset Parks and Recreation** or its staff responsible for any injuries that happen during normal training activities.
- **Medical:** If a medical emergency happens and I cannot be reached, I give permission for staff to seek medical care for my child. I will cover the costs.

2. Photo & Video Consent

- **Media Use:** I give **Grit Strength Fitness** permission to take photos and videos of my child during training to share on the official website, social media channels, and marketing materials.
- **Ownership:** I agree that I will not receive financial compensation or royalties for these images, and I waive the right to approve the final posts or edits. I also have the right to request an image or video be removed by contacting Grit Strength Fitness.

3. Signature & Agreement

By signing below, I agree to all terms above, including the mandatory media release for program participation.

Parent/Guardian Signature: _____

Date: _____