

Norwalk River Rowing
Club Waiver – The Edge Fitness Clubs
Norwalk, CT

Today's Date:

Last Name:

First Name:

Middle Initial:

Phone Number:

Birthdate:

To the best of my knowledge, I do not have any physical limitations that would prevent me from participating in the said program. I also understand that I participate in said program entirely at my own risk. I accept full responsibility for my use of any and all apparatus, appliances, facilities privilege or service whatsoever, owned and operated by this club at my own risk and shall hold this club, its shareholders, directors, officers, employees, representatives, and agents harmless from any and all loss, claim, injury, damage or liability sustained or incurred, by me resulting therefrom.

Waiver Signature: _____ Club Representative: _____

For Edge Use Only:

Barcode Number:

Agreement Number: