

Appendix J – Gym usage

Liability Waiver



Northern Lights Library System

Human Resources Department

5615- 48 St, Postal Bag 8

Elk Point, AB T0A 1A0

780-724-2596 ext. 2110

Health and Fitness Liability Waiver /Informed Consent Form

I, _____, acknowledge that the gym equipment offered through Northern Lights Library System is to be used at my own risk.

I acknowledge that my use of the gym facilities is purely voluntary and is in no way mandated by Northern Lights Library System.

In consideration of my use of the gym facilities, I, _____, hereby release Northern Lights Library System and its agents from any claims, demands, and causes of action as a result of my voluntary participation.

I fully understand that I may injure myself as a result of my use of the gym facilities and I, _____, hereby release Northern Lights Library System and its agents from any liability now or in the future for conditions that I may obtain. These conditions may include, but are not limited to, heart attacks, strokes, muscle strains, muscle pulls, muscle tears, broken bones, shin splints, injuries to knees or other joints of the body, injuries to back, injuries to a foot, heat prostration, or any other illness or soreness that I may incur, including death.

I HEREBY AFFIRM THAT I HAVE READ AND FULLY UNDERSTAND THE ABOVE STATEMENTS.

_____ (Participant's signature)

_____ (Witness)

_____ (Date)