



Waiver and Release of Liability

In agreeing to receive care provided by The Parkinson's Fitness Project, PLLC and to use the facilities provided therefore by 206 CrossFit located at 106 Lakeside Ave, Seattle, WA, 98122,

I agree as follows:

I fully understand and acknowledge that (a) the activities in which I will engage as part of the treatment provided by The Parkinson's Fitness Project and the physical therapy activities and equipment I may use as a part of that treatment have inherent risks, dangers, and hazards and such exists in my use of any equipment and my participation in these activities; (b) my participation in such activities and/or use of such equipment may result in injury or illness including, but not limited to bodily injury, disease, strains, fractures, partial and/or total paralysis, death or other ailments that could cause serious disability; (c) these risks and dangers may be caused by the employees of The Parkinson's Project or 206 CrossFit, the negligence of the participants, the negligence of others, accidents, or other causes.

By my participation in these activities and for use of equipment, I hereby assume all risks and dangers and all responsibility for any losses and/or damages whether caused in whole or in part by the negligence or the conduct of the representatives or employees of The Parkinson's Fitness Project or 206 CrossFit, or by any other person.

I, on behalf of myself, my personal representatives and my heirs, hereby voluntarily agree to release, waive, discharge, hold harmless, defend, and indemnify The Parkinson's Fitness Project or 206 CrossFit and their representatives, employees, and assigns from any and all claims, actions or losses for bodily injury, property damage, wrongful death, loss of services or otherwise which may arise out of my use of any equipment or participation in these activities. I specifically understand that I am releasing, discharging, and waiving any claims or actions that I may have presently or in the future for the negligent acts or other conduct by the representatives or employees of The Parkinson's Fitness Project or Crossfit 206.

I HAVE READ THE ABOVE WAIVER AND RELEASE OF LIABILITY AND VOLUNTARILY EXECUTED THIS DOCUMENT WITH FULL KNOWLEDGE OF ITS CONTENT.

NAME (PRINT) _____ DATE OF BIRTH: _____

SIGNATURE: _____ DATE: _____