

**Arizona LeadingAge  
Fitness Challenge for Seniors**

**WAIVER FORM**

**Must be completed by each participant. (Copy as needed)**

**Attendee Name** \_\_\_\_\_

**Community:** \_\_\_\_\_

**Emergency Contact** \_\_\_\_\_ **Telephone No.** \_\_\_\_\_

**WAIVER of LIABILITY (Please read before Signing)**

*I hereby agree to hold harmless the organizers & sponsors of Arizona LeadingAge Fitness Challenge for Seniors from any and all claims of whatever kind and nature which I or my representatives may have or at any time in the future have from any injury arising out of my participation in the Fitness Challenge for Seniors. I am in good physical condition and have no medical restrictions that would prohibit my participation in this event. I also understand that photos & videos may be taken during events and these photos & videos may be used to publicize these and/or future events.*

**Circle events participating in**

**Event Round One:** *Wii Bowling Basketball Bounce Obstacle Course .5 Mile Walk Cornhole*

**Event Round Two:** *Wii Bowling Basketball Bounce Obstacle Course .5 Mile Walk Cornhole*

Volunteer (non-staff)

LUNCH: (Circle One)      Vegetable      Meat

**Attendee Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Each attendee MUST complete a waiver.**