



Dear CrossFit Kids' Parent,

Thank you for allowing your child to be a part of the Anchor CrossFit Kids Class! The commitment to our children's future is crucial and there has never been a more critical time to teach our kids the importance of physical activity and what it means to live a healthy lifestyle; we are excited you have chosen CrossFit Kids to be a part of that path as CrossFit has changed all of our lives immeasurably for the better. With your child, we are not only able to potentially enhance their lives, but we also have the opportunity to shape their lives and the realities within them. We are passionate and committed to this endeavor; your child's safety and opportunity to enhance their personal lives are our primary focus.

We wanted to take this opportunity, now that the Kids Class is underway, to set some policies and procedures for the safety of your child and the effectiveness of their CrossFit class experience.

We will be running classes for two age groups: ages 4-8, and 9-13. Each class will last 30 minutes. Please note that it is not the age of your child that is the deciding factor for what class he or she attends. It is largely based upon individual skill, athleticism, and maturity and is ultimately decided upon by the head coach to ensure your child is getting the most out of the CrossFit experience.

As previously stated, your child's safety is paramount to the coaches, and it is with this focus we need your help. Below are some rules that we must enforce as a CrossFit Community to best protect your child; please:

1. We **STRONGLY** encourage parents to remain onsite while the Kids class during the 30 minute session. However if you absolutely have to drop them off and pick them up at the end of class we **REQUIRE** you to walk your children inside the building for the start of the class, and come inside the building to pick them up.
2. Unless pre-arranged with the head coach, the children are only allowed to go home with the person who drops them off.
3. Bring your children to the designated Kid area, where the head coach will meet them and take them onto the gym floor for the day's class.
4. Payment is month to month, and due the first of each month.
5. A waiver, signed by a parent or legal guardian, is required for each child before he or she is allowed to participate in a class.
6. Ensure your children are wearing clothes appropriate for running, jumping, rolling, pulling, swinging, climbing, crawling, throwing, and being upside down.
7. While in the gym, please allow **the coaches** to do our job, and refrain from coaching your child from the sideline.
8. Children with disciplinary problems: first warning-free of consequence, second warning-sit out the first two minutes of the game, third warning-go to the parent.
9. Finally, please make the head coach aware of any special needs for your children that may facilitate their individual safety, learning, and growth (i.e., medications, illness, physical/mental limitations, injury, sports, etc.).

I look forward to getting to know all of you personally and training your children to the utmost of my ability. If you have any questions, comments, problems, or concerns, please don't hesitate to get a hold of me at the following:

Jesse Marquez

[info@anchorcrossfit.com](mailto:info@anchorcrossfit.com)

720-515-1545



Childs Name (and nickname if any):
Name of Parent/guardian:
Address:
City: State: Zip:
Home Phone #:
Cell Phone #:
Email:
Emergency Contact:
Emergency Phone:
<b>The following people have my consent to pick up my child from Anchor CrossFit</b>
Name/Cell Phone:
Name/Cell Phone:
Name/Cell Phone:
<b><u>Health Assessment</u></b>
Date of last physical/routine medical exam:
Does your child have/suffer from any of the following:
Asthma: Yes _____ No _____
High blood pressure: Yes _____ No _____
Has your child suffered from any injury that prevents/limits any physical activity? Explain below
List any allergies we need to be aware of:
Please list any emergency medications (inhaler, etc) that we may be required to administer to your child
Release and authorization to administer listed medication:



## **INFORMED CONSENT/ASSUMPTION OF RISK:**

I, \_\_\_\_\_ agree and authorize \_\_\_\_\_ to participate in one or more physical fitness program(s)/class(es) sponsored by Anchor CrossFit, which may include, but not necessarily be limited to, CrossFit Training, and/or strength training of any kind by any affiliate, subsidiary or partnership of Anchor CrossFit and/or Tony Scott, Jesse Marquez, or employed trainers (hereinafter collectively referred to as Anchor CrossFit). Anchor CrossFit made me fully aware that the fitness programs/classes which Anchor CrossFit offers and in which I desire to participate are of a nature and kind that are extremely strenuous and can/may push me to the limits of my physical abilities. I the undersigned recognize and understand that the programs/classes are not without varying degrees of risk; which may include, but are not limited to the following: Injury to the musculoskeletal and/or cardio respiratory systems which can result in serious injury or death, injury or death due to negligence on the part of myself, my training partner, or other people around me, injury or death due to improper use or failure of equipment, injury or death due to falls/trips/drops or slips before, during and after physical activity, or injury or death due to a medical condition, whether known or unknown by me. I am aware that any of these above mentioned risks may result in serious injury or death to myself and or my partner(s).

**Initials:** \_\_\_\_\_

I willingly assume full responsibility for any and all risks that I am exposing myself to as a result of my participation in Anchor CrossFit programs/classes and accept full responsibility for any injury or death that may result from participation in any activity, class or physical fitness program. I hereby certify that I know of no medical problems that would increase my risk of illness and injury as a result of participation in a fitness program designed by Anchor CrossFit. Anchor CrossFit informed me that there exists the possibility of adverse physical changes during an exercise program, and I fully understand the same. Anchor CrossFit informed me that these changes could include abnormal blood pressure, fainting, disorder of heart rhythm, stroke, and in very rare instances, heart attack or even death, and I fully understand the same. With my full understanding of the above information, I agree to assume any and all risk associated with my participation in Anchor CrossFit programs/classes.

**Initials:** \_\_\_\_\_

## **RELEASE:**

In full consideration of the above mentioned risks and hazards and in full consideration of the fact that I am willingly and voluntarily participating in the activities made available by Anchor CrossFit, and with my full understanding of all of the above, I hereby waive, release, remise and discharge Anchor CrossFit and its agents, officers, principals and employees and volunteers, of any and all liability, claims, demands, actions or rights of action, or damages of any kind related to, arising from, or in any way connected with, my participation in Anchor CrossFit fitness programs/classes, including those allegedly attributed to the negligent acts or omissions of the above mentioned parties.

This agreement shall be binding upon me, my successors, representatives, heirs, executors, assigns, or transferees. If any portion of this agreement is held invalid, I agree that the remainder of the agreement shall remain in full legal force and effect.

If I am signing on behalf of a minor child, I also give full permission for any person connected with Anchor CrossFit to administer first aid deemed necessary, and in case of serious illness or injury, I give permission to call for medical and or surgical care for the child and to transport the child to a medical facility deemed necessary for the well-being of the child.

**Initials:** \_\_\_\_\_



**Indemnification:** I recognize that there is risk involved in the types of activities offered by Anchor CrossFit. Therefore I accept financial responsibility for any injury that I, or the participant may cause either to him/herself or to any other participant due to his/her negligence. Should the above mentioned parties, or anyone acting on their behalf, be required to incur attorney's fees and costs to enforce this agreement, I agree to reimburse them for such fees and costs. I further agree to indemnify and hold harmless Anchor CrossFit, their principals, agents, employees, and volunteers from liability for the injury or death of any person(s) and damage to property that may result from my negligent or intentional act or omission while participating in activities offered by Anchor CrossFit.

**Initials:** \_\_\_\_\_

**Use of picture(s)/film/likeness:** I agree to allow Anchor CrossFit, its agents, officers, principals, employees and volunteers to use picture(s), film and/or likeness of me for advertising purposes. In the event I choose not to allow the use of the same for said purpose, I agree that I must inform Anchor CrossFit of this in writing.

**Initials:** \_\_\_\_\_

**I have fully read and fully understand the foregoing assumption of risk, and release of liability and I understand that by signing it obligates me to indemnify the parties named for any liability for injury or death of any person and damage to property caused by my negligent or intentional act or omission. I understand that by signing this form I am waiving valuable legal rights.**

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Participant's Name (Signature) (Date)

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Legal Guardian (Signature) (Date)