



Date: _____

Athlete's/Participant's Info:

Last Name: _____ First Name: _____

Date of Birth: _____ Grade: _____

Does participant currently have health insurance? Yes No

If yes please provide carrier information and policy number _____

Parent's Info (if participant / athlete is under 18 years of age. If over 18 complete accordingly)

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Emergency Contact: _____ Email: _____

Payment: (Check one)

Credit Card: Master Card Visa American Express Discover

Card Number: _____

Card Expiration date: _____ / _____ 3 digit Code: _____

Cash

Check

I understand that I cannot transfer the training sessions to any other person's nor is any portion of the training refundable upon the signing of this agreement. The no refund policy applies to team payments (current and future), rentals, lessons, programs or any other activity conducted through East Coast Conditioning Sports Plex LLC. East Coast Conditioning Sports Plex LLC Waiver signature on the reverse side. **MUST BE** signed prior to any participate conducted within or by East Coast Conditioning Sports Plex LLC. I also understand that pictures and images from the training classes may be used in future marketing / promotional material.

Athlete's Signature (over the age of 18) _____

Parent's Signature _____ Date _____

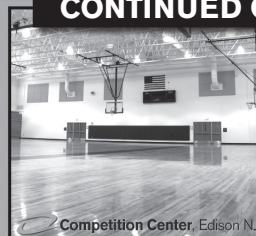
where athletes train

ECC SPORTS PERFORMANCE OFFERS SPECIALIZED TRAINING IN

BASEBALL – SOFTBALL – SOCCER – LACROSSE – BASKETBALL
FIELD HOCKEY – GOLF – STRENGTH AND CONDITIONING

EAST COAST OFFERS COMPETITIVE TRAVEL TEAMS IN:

LACROSSE – BASEBALL – SOFTBALL



CONTINUED ON OTHER SIDE



READ CAREFULLY

WAIVER AND RELEASE OF LIABILITY

I acknowledge that because physical exercise can be strenuous and subject to risk of serious injury, Athlete should obtain a physical examination from a doctor before using any exercise equipment or participating in any exercise activity or sporting activity. I agree that if Athlete engages in any physical exercise or activity, or uses any East Coast Conditioning Sports Plex LLC ("ECC") amenity or equipment on the premises or off premises, Athlete does so entirely at his/her own risk. I agree that Athlete is voluntarily participating in these activities and use of these facilities and premises and assume all risks of injury, illness, or death. I further agree that ECC also is not responsible for any loss of Athlete's personal property.

I, on behalf of myself, my personal representatives and my heirs, hereby voluntarily agree to release, waive, discharge, hold harmless, defend and indemnify ECC and its owners, employees, agents and representatives from any and all claims, actions or losses for personal injury, property damage, wrongful death or economic loss which may arise out of Athlete's use of ECC equipment or facilities or Athlete's participation as a member of any ECC team.

This waiver and release of liability includes, without limitation, all injuries which may occur as a result of (a) the use of all amenities and equipment at ECC facilities, (b) Athlete's participation in any practice, game, activity, class, program, personal training or instruction whether at ECC premises or elsewhere, (b) the sudden and unforeseen malfunctioning of any equipment, (c) ECC's instruction, training, supervision, or dietary recommendations, and (d) Athlete's slipping and/or falling while at ECC or at ECC premises, including adjacent sidewalks and parking areas.

I acknowledge that I have carefully read this "waiver and release of liability" and fully understand that it is a release of liability. I expressly agree to release and discharge ECC and its owners, employees, agents, representatives, successors or assigns from any and all claims or causes of action and I agree to voluntarily give up or waive any right that Athlete may otherwise have to bring a legal action against ECC, its owners, employees, agents or representatives for personal injury, property damage, wrongful death or economic loss. By signing this release, I acknowledge that I understand its content and that this release cannot be modified orally.

To the extent that statute or case law does not prohibit releases for negligence, this release is also for negligence on the part of ECC, its owners, employees, agents or representatives.

If any portion of this release from liability shall be deemed by a Court of competent jurisdiction to be invalid, then the remainder of this release from liability shall remain in full force and effect and the offending provision or provisions severed here from.

I HAVE READ THE ABOVE WAIVER AND RELEASE OF LIABILITY AND BY SIGNING IT AGREE IT IS MY INTENTION TO EXEMPT AND RELIEVE EAST COAST CONDITIONING SPORTS PLEX, LLC, ITS OWNERS, EMPLOYEES, AGENTS AND REPRESENTATIVES FROM LIABILITY FOR PERSONAL INJURY, PROPERTY DAMAGE, WRONGFUL DEATH OR ECONOMIC LOSS CAUSED BY NEGLIGENCE OR ANY OTHER CAUSE

Athlete's Name (Printed) _____

Signature of Athlete _____

Parent or Guardian's Name (Printed) _____

Signature of Parent or Guardian (if less than 18 years old) _____

Date _____