



Friend Fitness & Performance is under constant camera surveillance. This footage will be reviewed to ensure compliance with all rules and policies. Friend Fitness & Performance has the right to revoke memberships without refund for any reason deemed necessary.

- Only members of Friend Fitness & Performance may utilize the fitness center.
- Members must scan key fob each visit whether the doors are locked or unlocked.
- Members are required to use their own key fob at all times.
- Do not prop doors open or allow anybody else to enter when you use your key fob.
- Shirts and appropriate footwear are required. NO DIRTY SHOES!
- No alcohol or tobacco use on the premises.
- Friend Fitness & Performance is not responsible for any lost or stolen items.
- Wipe down equipment after each use with provided cleaning solution and white towels.
- RACK YOUR WEIGHTS.
- Take care of our floor by using platforms and bumper plates for appropriate lifts (deadlift, power clean, etc.).
- Use proper precautions when lifting weights (spotters, safety bars, clips, etc.).
- Don't move benches on/off platforms.
- Don't throw medicine balls or any other piece of equipment across the gym.
- When fitness center is busy:
 - Don't camp on equipment - allow others to work in between sets.
 - Observe a 30-minute time limit on all cardio equipment.
- Turn out the labeled lights and fans if you are the last to leave. These are located behind the front desk and on the wall with the cardio equipment.
- Report any damage or issues to fitness center staff.
- Respect other members with your language, music, and general behavior.
- Respect our fitness center by picking up after yourself and putting used towels and trash in the appropriate receptacles.
- Gym towels are not to be used for the shower. You must bring your own bath towel and toiletries.
- Don't park in front of surrounding businesses during their hours of operation.
- Kid Clause: We encourage you not to bring your children to the weight room, as it is not a place for kids. However, we understand that some members won't have a choice. If you must bring your children, they are not allowed on any of the equipment. You are responsible for keeping them safe and occupied so that they don't cause disruptions for other members.



MEMBERSHIP OPTIONS

MONTHLY MEMBERSHIP

Adult \$30/month	Student \$25/month	Senior \$25/month
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EXTENDED MEMBERSHIP*

Adult \$25/month	Student \$20/month	Senior \$20/month
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Student: High school & younger

Senior: Ages 65+

***This is a 6 month minimum, open-ended membership. Membership rate will be automatically withdrawn from a bank account on the first day of each month. After the initial 6 month period, withdrawals will continue until you notify Friend Fitness to end your membership.**

All memberships require a \$10 deposit for a key fob. This money will be returned to any customer who returns their key fob at the end of membership. If a member requires a replacement key, another \$10 deposit must be made and the first deposit will not be returned.

MEMBER INFORMATION

FIRST NAME	MI	LAST NAME	DATE OF BIRTH	AGE
ADDRESS	CITY		STATE	ZIP
PHONE	Can we text this number?	EMAIL		
EMERGENCY CONTACT NAME	RELATIONSHIP	PHONE		

I, the undersigned, hereby acknowledge that the above information is correct. I state that I have read the membership options and fully understand what my membership will entail. I state that I have read and understood the rules and policies presented to me on a separate sheet of paper. I understand that failure to comply by the rules and regulations may result in revocation of membership without refund.

PRINT NAME	SIGNATURE	DATE
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FOR OFFICE USE

Key Fob #: _____ Monthly / Date: _____ Grad Year: _____

Membership #: _____ Extended / Dates: _____ to _____

FRIEND FITNESS & PERFORMANCE WAIVER



RELEASE, INDEMNIFICATION, AND HOLD HARMLESS AGREEMENT

In consideration of participating in health or fitness club activities, and for other good and valuable consideration, I hereby agree to release and discharge from liability arising from negligence FRIEND FITNESS AND PERFORMANCE, LLC and its owners, directors, officers, employees, agents, volunteers, participants, and all other persons or entities acting for them (hereinafter collectively referred to as "Releasees"), on behalf of myself and my children, parents, heirs, assigns, personal representative and estate, and also agree as follows:

1. I acknowledge that health or fitness club activities involve known and unanticipated risks which could result in physical or emotional injury, paralysis, or permanent disability, death, and property damage. Risks include, but are not limited to, musculoskeletal injuries, broken bones, and/or overuse injuries, injuries caused by equipment that breaks or otherwise fails; death as a result of drowning or brain damage caused by near drowning; medical conditions resulting from physical activity; and damaged clothing or other property. I understand such risks simply cannot be eliminated, despite the use of safety equipment, without jeopardizing the essential qualities of the activity.
2. I expressly accept and assume all of the risks inherent in this activity or that might have been caused by the negligence of the Releasees. My participation in this activity is purely voluntary and I elect to participate despite the risks. In addition, if at any time I believe that event conditions are unsafe or that I am unable to participate due to physical or medical conditions, then I will immediately discontinue participation.
3. I hereby voluntarily release, forever discharge, and agree to indemnify and hold harmless Releasees from any and all claims, demands, or causes of action which are in any way connected with my participation in this activity, or my use of their equipment or facilities, arising from negligence. This release does not apply to claims arising from intentional conduct. Should Releasees or anyone acting on their behalf be required to incur attorney's fees and costs to enforce this agreement, I agree to indemnify and hold them harmless for all such fees and costs.
4. I represent that I have adequate insurance to cover any injury or damage I may suffer or cause while participating in this activity, or else I agree to bear the costs of such injury or damage myself. I further represent that I have no medical or physical condition which could interfere with my safety in this activity, or else I am willing to assume – and bear the costs of – all risks that may be created, directly or indirectly, by any such condition.
5. In the event that I file a lawsuit, I agree to do so solely in the state where Releasees' facility is located, and I further agree that the substantive law of that state shall apply.
6. I agree that if any portion of the agreement is found to be void or unenforceable, the remaining portions shall remain in full force and effect.

By signing this document, I agree that if I am hurt or my property is damaged during my participation in this activity, then I may be found by a court of law to have waived my right to maintain a lawsuit against the parties being released on the basis of any claim for negligence.

I have had sufficient time to read this entire document and, should I choose to do so, consult with legal counsel prior to signing. Also, I understand that this activity might not be made available to me or that the cost to engage in this activity would be significantly greater if I were to choose not to sign this release, and agree that the opportunity to participate at the stated cost in return for the execution of this release is a reasonable bargain. **I have read and understood this document and I agree to be bound by its terms.**

Print Name _____ Sign Name _____

Address _____ City _____ State _____ Zip Code _____

Telephone _____ Date _____

PARENT OR GUARDIAN ADDITIONAL AGREEMENT (Must be completed for participants under the age of 18)

In consideration of _____ (PRINT minor's name) being permitted to participate in this activity, I further agree to indemnify and hold harmless Releasees from any claims alleging negligence which are brought by or on behalf of minor or are in any way connected with such participation by minor.

Print Name _____ Sign Name _____ Date _____

(If notarization is necessary, please sign & stamp this side of form.)