

Maximum Mobility Movement Workshop

Jay Armstrong - Z-Health Master Trainer, Master Tae Kwon Do Instructor, Senior RKC Kettlebell Instructor

Saturday, April 19, 2014

**The Kettlebell Club
629 Highway 3 South
League City, TX 77573
281-332-0999**

www.kettlebellclub.com

Workshop Registration

Date: _____

Name: _____

Address: _____

email: _____

phone: _____

weight: _____

age: _____

Occupation: _____

	Poor			Excellent	
Rate your current strength level (circle one):	1	2	3	4	5
Rate your current endurance level (circle one):	1	2	3	4	5
Rate your current flexibility level (circle one):	1	2	3	4	5

Describe any physical problems or limitations that the instructor should be aware of:

Describe your athletic accomplishments

If paying by check, please make the check payable to “The Kettlebell Club” and send along with this registration form to the above address.

Registration Fee: \$179 (Registration Deadline – Friday, April 11th, 2014)
Register March 21st for ONLY \$149 !!! (a \$30 savings)

→ *Please note that there is a 50% cancellation fee after April 14th, 2014*

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If paying by credit card, please complete the following and fax to "The Kettlebell Club" at 281-332-0990.

Name on Card: _____

Credit Card Number: _____

Zip Code for Credit Card Billing Address: _____

Card Type (check one):

MasterCard

VISA

Expiration Date: _____

Billing Address: _____

I understand that the above credit card will be billed for the registration fee circled:

\$179.00

\$149.00

Signature: _____

Date: _____

The Kettlebell Club - Waiver & Release Form

Warning! Bodyweight Exercises and any Physical Activity can be Dangerous!

I, _____, understand that bodyweight exercises, stretching and mobility drills can cause serious injury to myself and others and could even cause death! I want to learn and attempt the exercises being taught in this workshop, I will use good judgment at all time, and I assume ALL RESPONSIBILITY for injury to myself. I will not hold The Kettlebell Club, The Movement Pro, Jay Armstrong, its trainers, or owners responsible in any way for personal injury.

Because physical exercise can (and most likely will) be strenuous and subject to risk of serious injury, The Kettlebell Club has strongly urged me to obtain a physical examination from a doctor before using weights, exercise equipment, or participating in any physical activities.

I agree that participating in training, physical exercise, stretching, self-defense training, or weight lifting is done completely of my free will and AT MY OWN RISK. I agree that I am voluntarily participating in these activities, the use of these facilities, the use of these weights, or the use of this equipment and I assume ALL RISK of injury, illness, or death. I will not hold The Kettlebell Club liable for loss of my personal property.

I will not hold The Kettlebell Club, its trainers, or owners liable for any recommendations for changes in diet including the use of food supplements, weight reduction, or body building enhancement products. The Kettlebell Club has urged me to consult with a physician prior to undergoing any dietary or food supplement changes.

I acknowledge that I have carefully read this “waiver and release” and fully understand that it is a release of liability. I expressly agree to release and discharge The Kettlebell Club, its trainers, and its owners from any claims or causes of action and I agree to voluntarily give up or waive any right that I may otherwise have to bring a legal action against The Kettlebell Club, its trainers, or its owners for personal injury or property damage.

To the extent that statute or case law does not prohibit releases for negligence, this release is also for negligence. 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.

By signing this release, I acknowledge that I understand its content and that this release cannot be modified by any verbal or oral agreement.

Signed: _____

Printed Name: _____

Date: _____