

COACH ROZY - POWERED BY AVERA SPORTS YANKTON

Winter OFF-SEASON

Nov. 27, 2022 - Feb. 22, 2023

2x - 3x or 4x a Week Training Sessions

12 Weeks of Training (13 weeks -Off Week of Dec. 25 - Dec. 30 for Xmas) Mon-Tues-Wed-Thurs 4:00 pm to 5:00 pm

| Name |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Address |
| City State Zip Code |
| Phone # Email |
| Emergency Contact |
| Emergency Contact Phone # |
| Emergency Contact Email |
| Grade 5th 6th7th 8th 9th10th 11th 12th |
| T-Shirt Size S M L XL XXL XXXL |
| I GIVE PERMISSION TO "COACH ROZY" TO SEND AND BE INCLUDED IN HIS DAILY MOTIVATIONAL REMINDERS, HIS NEWSLETTERS AND WEEKLY UPDATES BY EMAIL WITH THE UNDERSTANDING THAT MY INFORMATION WILL NOT BE GIVEN OUT TO ANY OTHER PARTIES. YES NO |
| WINTER SESSION RUNS MONDAY - NOV 27, 2023 TO FEB 22, 2024; 2x-3x-4x a WK 12 WEEKS of TRAINING out of 13 WEEKS; Mon-Tues-Wed-Thurs each week |
| 4x wk program \$299.00 3x wk program \$279.00 2x wk program \$249.00 (please complete Page 2) |

*Make Checks or Money Orders to AVERA SPORTS YANKTON. Credit Cards are accepted - call 605-668-8357.

Mail Registration to: Coach Rozy Performance, MMU Campus, 1105 W. 8th St., Yankton, SD 57078, drop it off at Coach Rozy Performance, or bring the filled-out form with the athlete on the first day.

CANCELLATION POLICY: If payment is not made by the 4th workout session of the of first week, training status will be "frozen" and access to facility and training will be denied. Athletes can cancel training sessions at any time. The refund amount will be prorated based on the number of sessions/weeks athletes used services.

SESSION POLICY: All sessions and programs must be paid in advance before any training begins (there will be a 4 day grace period at the start of each training session package). All sessions will begin at the scheduled time. No refund or credit will be granted if you are late or if you miss a session or you do not use a service offered. You agree to inform your coach of any conditions or changes in your health while participating in the Program.

INFORMED CONSENT/LIABLITY WAIVER:

The undersigned (including a parent of a minor) has requested participation in the Coach Rozy Performance Program or an Elevation Nation Bootcamp - Powered by AVERA Sports (hereinafter referred to as the "Coach Rozy Bootcamp"). The undersigned understands participation is voluntary and that they can withdraw at any time from Coach Rozy Performance or Coach Rozy Bootcamp. Any money paid to Coach Rozy Performance or Bootcamp is refundable, but certain portion of payment will be taken out for services rendered. As the undersigned, I give permission to use, reprint, and produce any photographs or videos taken of myself or my child during training with Coach Rozy Performance with the understanding that such material will only be used by Coach Rozy Performance and/or AVERA Sports to promote their programs through marketing and social media platforms.

The undersigned (including a parent of a minor) acknowledges that use of the Beresford High School Facilities -- including without limitation participation in any of the programs or activities and use of equipment and facilities may cause injury. The undersigned hereby assumes all risks of injury which may result from or arise from the attendance or use of equipment, activities, or facilities, and the undersigned agrees, on behalf of her/himself and its heirs, executors, administrators and assigns to fully and forever release and discharge AVERA, Coach Rozy and Beresford School and its respective officers, directors, employees, agents, successors and assigns (collectively, the "Releasees") from any and all claims, damages, demands rights of actions or causes of action, present or future, known or unknown, anticipated or unanticipated, resulting from or arising out of the undersigned's attendance at or use of equipment, activities, or facilities of Beresford Facilities. This includes, without limitation, any claims, damages, demands, rights, action or causes of action resulting from or arising out of the negligence of the Releasees. Further, the undersigned releases and discharges the Releasees from any and all liability from any loss or theft of, or damage to, personal property, and lost wages, both present and future, and future loss of earning capacity. The undersigned acknowledges that he/she (or parents if user is a minor) has carefully read this waiver and release and fully agrees to its terms.

The undersigned (including a parent of a minor) acknowledges that use of Coach Rozy Powered by Avera Sports Performance programming ---including without limitation participation in any of the programs or activities and use of equipment and facilities may cause injury. The undersigned hereby assumes all risk of injury with may result from or arise from the attendance or use equipment, activities, or facilities, and the undersigned agrees, on behalf of her/himself and its heirs, executors, administrators and assigns to fully and forever release and discharge Avera Sacred Heart and its respective officers, directors, employees, agents, successors and assigns (collectively, the "Releasees") from any and all claims, damages, demands rights of actions or causes of action, present or future, known or unknown, anticipated or unanticipated, resulting from or arising out of the undersigned's attendance at or use of equipment, activities, or facilities where Coach Rozy Powered by Avera Sports programming is performed. This includes, without limitation, any claims, damages, demands, rights, action or causes of action resulting from or arising out of the negligence of the Releasees. Further, the undersigned releases and discharges the Releasees from any and all liability from any loss or theft of, or damage to, personal property, and lost wages, both present and future, and future loss of earning capacity. The undersigned acknowledges that he/she (or parents if user is a minor) has carefully read this waiver and release and fully agrees to its terms.

| Participant Name (Please Print) |
|-----------------------------------------------------|
| |
| Participant Signature |
| |
| Date |
| |
| PLEASE FILL OUT AND SIGN IF PARTICIPANT IS A MINOR: |
| |
| |
| Parent or Guardian Name (Please Print) |
| Parent or Guardian Name (Please Print) |
| Parent or Guardian Name (Please Print) |
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