

[Please click here to apply for AHS weight room and/or pool use, and be sure to read all of the following information. Please consider keeping a copy for your records.](#)

**ASSUMPTION OF RISK AND RELEASE OF LIABILITY
FOR USE OF THE WEIGHT ROOM AT THE ATTICA JR.-SR. HIGH SCHOOL**

I, _____, an adult age eighteen or over, will be involved in the following activity: **Use of the Attica Consolidated School Corporation's weight room and pool facilities located at the Attica Jr. – Sr. High School. By having access to these facilities, I will be allowed to use any equipment that is in the weight room or pool.**

I understand the scope, nature, and extent of the risks involved in the stated activity and enter into said activity voluntarily and freely choose to incur the risks involved in such activity. I am aware of the many dangers that are involved with the activities and I am aware of both the danger of foreseen and unforeseen risks, and hereby assume said risks in said activity. Said risks are those associated with physical activities, as well as those risks that come with using weight training machines and free weights.

In exchange for permitting myself to engage in the above activity, I hereby release the owner of the facility for their actions and involvement with said activity, their agents, servants, employees, and members of their family, from any and all liabilities, claims, demands, actions, and causes of action for whatsoever arising out of or relating to any loss, damage or injury that may be sustained by the undersigned or damage to any property of myself while participating with such activity while under the control or supervision of the person or persons conducting or managing said activity.

This statement shall serve as a release and as the assumption of risk on my heirs, executors, successors, administrators, and assigns and is intended to release the above entitled individuals, all of their agents, officer, servants, employees, and family members from any and all liability, claims, demands, actions and causes of actions arising out of the participation in the above activities.

I have acknowledge that I have read all of the above provisions, fully understand the terms and conditions expressed therein, and have freely chosen the provision relating to exemption for liability, covenant not to sue, and release of liability. I understand that if I institute any suit or action at law for any claim for damages or cause of action because of any personal injury or property damage due to the activity stated above, this Assumption and Release can and will be used in Court. I understand that I will be responsible for all fees and expenses incurred by the individuals listed above conducting said activities to defend any such suit or cause of action.

Date

Participant Signature

TERMS OF USE

I, _____, acknowledge that having access for the use of the facility is a privilege and not a right, and as such agree to the following terms and conditions:

1. I will enter my name upon the sign in sheet located on the wall next to the security alarm system upon entering the premises. I will note the date of the visit, the time I arrive, and the time that I exit the facility upon the sheet provided.
2. I will only use the facility when school is in session, Monday-Friday 4:00am-7:00am, 6:00pm-10:00pm, Weekends 7:00am-10:00pm
3. I do not have the right to access any showering facility, locker room, or gymnasium.
4. I am not permitted to bring any other persons with me to use the facility, unless they have paid the required fee and executed a Release of Liability Form.
5. I acknowledge that my use of the facility cannot interfere with use by any athletic team, as the athletic teams shall be given preference to use of the facility.
6. I will pay an annual usage fee of \$50.00 per calendar year, to be used for upkeep of the facility.
7. I understand that it is explicitly prohibited to purposely leave any exterior door, the weight room door, or pool doors unlocked or "propped open." I understand that my key fob will be de-activated for my failure to comply with this policy.
8. I understand that I must also complete a background check through Safe Hiring Solutions using the link on the Attica Schools Website

ANY VIOLATION OF THESE TERMS AND CONDITIONS WILL RESULT IN THE LOSS OF MY PRIVILEGE TO USE THE WEIGHT ROOM AND/OR POOL FACILITY AT THE ATTICA JR. – SR. HIGH SCHOOL.

UPON REVOCATION OF MY PRIVILEGE TO USE THE FACILITY I WILL RETURN MY FOB PASS KEY TO THE ATTICA CONSOLIDATED SCHOOL SYSTEM, OR PAY A FEE OF \$25.00 FOR THE FOB PASS KEY.

Date

Participant Signature

Phone #

Email Address

Notes:

-You must sign in and out at the auditorium entrance door.

-You must always use the auditorium entrance to enter the building for weight room/pool use.

If you have problems or questions, please contact David Jensen at 765-762-7000 ex. 4002.

Updated 1/5/18