

**GOLD MEDAL ATHLETICS  
TRAINING PROGRAM**

**LIABILITY WAIVER/INFORMED CONSENT FORM**

"I, \_\_\_\_\_, have enrolled in a specialized running program through Gold Medal Athletics. I recognize that the program may involve strenuous physical activity. I hereby affirm that I am in good physical condition and do not suffer from any known disability or condition which would prevent or limit my participation in the program."

"In consideration of my participation in the running program I, \_\_\_\_\_, hereby release Gold Medal Athletics and its agents from any claims, demands, and causes of action as a result of my voluntary participation."

"I fully understand that injuries are possible as a result of my participation in the program and I \_\_\_\_\_, hereby release Gold Medal Athletics and its agents from any liability now or in the future for conditions that I may obtain. These conditions may include, but are not limited to, heart attacks, muscle strains, muscle pulls, muscle tears, broken bones, shin splints, heat prostration, head injuries, injuries to the knee, the back, to the foot or any other area of the body, any accident or illnesses (including death) that I may incur."

**I HEREBY AFFIRM THAT I HAVE READ AND FULLY UNDERSTAND THE ABOVE STATEMENTS.**

\_\_\_\_\_ (Participant Signature)

\_\_\_\_\_ (Date)

\_\_\_\_\_ (Signature of legal guardian if participant is a minor)