

FTP Training Program Waiver

I, "the client" hereby consent to engage voluntarily in exercise prescribed to me by FTP Training. I certify that I am currently in good health and that I have completed a **Pre-Training Risk Factor Questionnaire** and have provided correct and accurate responses to the questions on this form. I understand that the training program that I will undertake is strenuous and I acknowledge that participation in this training involves certain risks. I understand that by undertaking this training, I voluntarily assume these risks.

In consideration of my following a training program from FTP Training, I hereby release and forever discharge FTP Training, its management, partners, agents, contractors, associates and employees (whether acting within the scope of their employment or not) from any claims, demands or causes of action relating to or arising from my presence or participation in an FTP Training training procedure, which may result in illness or injury to me or even death. I intend this release to bind my heirs, executors, assigns, administrators, personal representatives, and myself.

Rider Name: _____
Rider Signature: _____
Date: _____

Guardian/Parent Name: _____
Guardian/Parent Signature: _____
Date: _____

TRAINING

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