



**Homestead Fitness Center**  
115 E. Homestead Blvd., Lynden, WA 98264

*Waiver Agreement*

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Home/Cell:** \_\_\_\_\_

**Contact Person:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Waiver and Release:**

- \_\_\_\_\_ Fitness Center Member Guest
- \_\_\_\_\_ Registered Vacation International Owner
- \_\_\_\_\_ Guest Pass Holder

You (member and your guest) agree that you are aware that you are engaging in physical exercise, including the use of exercise machines, free weights, club facilities, personal training and instruction, swimming activities and use of spas, and locker rooms, which could cause injury to you. You are voluntarily participating in these activities and assume all risk of injury to you that might result. You hereby agree to waive any claims or rights you might otherwise have to sue seller, its employees or agents for injury to you on account of these activities. You agree and acknowledge that you have carefully read this Waiver and Release, and fully understand it is a release of liability. You further agree to release Homestead Fitness Center and The Homestead Club, Inc. from any liability for any loss or theft of personal property. Homestead Fitness Center will make no evaluation whether you or your guest are sufficiently fit for any exercise activities. You should always consult your physician before commencing a physical exercise program. I will complete a Child Work-out Waiver for any of my children ages 10-14 years old and understand that children under 10 years of age are not permitted.

IN WITNESS WHEREOF the undersigned have executed this agreement at Lynden, Washington, this  
\_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

**FITNESS GUEST(S):**

**THE HOMESTEAD CLUB, INC. dba  
HOMESTEAD FITNESS CENTER**

\_\_\_\_\_  
**Guest Signature**

\_\_\_\_\_  
Fitness Staff Member

\_\_\_\_\_  
**Guest Signature**

\_\_\_\_\_  
**Guest Signature**