



# THE HOUSE FITNESS BENCH PRESS CONTEST

19 October 2019

The House Fitness

1601 Coffee Road  
Modesto CA – USA 95355

**Alzheimer's Fundraiser-Al's Peeps-** <http://act.alz.org/goto/makeba>

Meet Director: Ps. Doug Mattingly (209)-338-0300 / [doug@thehousefitness.com](mailto:doug@thehousefitness.com)

First Name:		DATE OF BIRTH:	
Last Name:		AGE:	
SEX: M <input type="checkbox"/>	F <input type="checkbox"/>	ADDRESS:	STATE:
DAY PHONE:		EMAIL:	BODY WEIGHT:

CHECK WEIGHT CLASS (lbs.)

MEN:	205 & UNDER <input type="checkbox"/>	205-225 <input type="checkbox"/>	225 & OVER <input type="checkbox"/>			
WOMEN:	122 & UNDER <input type="checkbox"/>	122-147 <input type="checkbox"/>	147 & OVER <input type="checkbox"/>			
T-SHIRT	S <input type="checkbox"/>	M <input type="checkbox"/>	L <input type="checkbox"/>	XL <input type="checkbox"/>	2XL <input type="checkbox"/>	3-4XL <input type="checkbox"/>

Each lifter will receive ONE free event T-shirt

<input type="checkbox"/> Bench Press	\$15/USD	ALL ENTRIES ARE DUE BY September 28 <sup>th</sup> , 2019
<input type="checkbox"/> Walk to end Alzheimer's Donation	\$	Technical Meeting: Oct. 19 9:00am
TOTAL AMOUNT ENCLOSED:		Benching starts @ 10:00 am
<b>Weigh-Ins:</b> ALL Women/Men Friday Oct. 18, 2019 (12-7pm)		<b>Payment to:</b> The House Fitness 1601 Coffee Road Modesto, CA 95355





**ATHLETES MUST COMPLETE AND SIGN THE HOUSE FITNESS, WAIVER OF LIABILITY, INDEMNITY**

I FULLY UNDERSTAND THAT I MAY SUFFER INJURY AS A RESULT OF MY PARTICIPATION IN THE CONTEST AND I HEREBY RELEASE THE HOUSE FITNESS CENTER FROM ANY AND ALL LIABILITY NOW OR IN THE FUTURE, INCLUDING BUT NOT LIMITED TO MEDICAL EXPENSES, LOST WAGES, PAIN AND SUFFERING, THAT MAY OCCUR BY REASON OF HEART ATTACKS, MUSCLE STRAINS, OR KNEE/LOWER BACK/FOOT INJURIES, AND ANY OTHER ILLNESS, OR INJURY, HOWEVER CAUSED, WHETHER OCCURRING DURING OR AFTER MY PARTICIPATION IN THE CONTEST OR USE OF THE CONDITIONING AND EXERCISE EQUIPMENT AND FACILITIES, REGARDLESS OF FAULT.

I HAVE READ THIS AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND HAVE SIGNED IT FREELY AND WITHOUT ANY INDUCEMENT OR ASSURANCE OF ANY NATURE AND INTEND IT TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW AND AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID, THE BALANCE, NOT WITHSTANDING, SHALL CONTINUE IN FULL FORCE AND EFFECT.

**PRINTED NAME OF PARTICIPANT:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**PARTICIPANT'S SIGNATURE (only if age 18 or over):** \_\_\_\_\_

**Date:** \_\_\_\_\_

