

NAME: \_\_\_\_\_ Birthdate:(mm/dd/yy): \_\_\_\_\_  MARRIED  SINGLE # OF CHILDREN \_\_\_\_\_

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

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

City: \_\_\_\_\_ Zip: \_\_\_\_\_

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

**Check All That Apply:**

- I am here for a Club Tour/Membership info
- Paid Guest Fee \$15
- Guest Pass (attach pass)
- I am a Hotel Guest
- I am here for Orthopaedic Associates

**I am here for a service or drop in class**

- Massage
- Spa/facial
- Yoga
- Pilates
- Other: \_\_\_\_\_

**How did you hear about us?**

- Newspaper
- Radio
- Friend: \_\_\_\_\_
- Employer: \_\_\_\_\_
- Direct Mailer
- Drive by
- Internet
- Other: \_\_\_\_\_

I'm interested in learning more about: (please circle)

- Personal training   Pilates   Yoga   Group Exercise Classes   Childcare   Hockey Training   Speed, Agility Training  
 Self Defense   Massage   Triathlon training   Nutrition Info   Computrainer   Spa Services

**GUEST ASSUMPTION OF RISK, RELEASE, AND WAIVER OF LIABILITY**

I, the undersigned, do hereby acknowledge that use of Be Fitness and Wellness Center's facilities, services, equipment or premises involves risk of injury to my person and my property, and that as a condition to the use of facility, I assume full responsibility for such risks. I hereby release and hold harmless Be Fitness and Wellness Center, it's agents, related entities and employees, from all liability to me, my heirs and assigns for any loss or damage to me, and forever give up any claims therefore on account of injury to my person or property whether caused by active or passive negligence of Be Fitness and Wellness Center.

**GUEST SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

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