

InPACT@Home Child Assent and Waiver (Child)

I have chosen to participate in InPACT@Home. If I am under 18, I have my legal guardian's permission to participate. I understand that there are risks related to exercising. Completing the InPACT@Home exercise videos may result in injury. InPACT@Home exercises will challenge my heart, lungs, and muscles. I understand that exercise can be harmful to my body if not done correctly.

InPACT@Home instructors will provide instructions for each exercise. I will follow and obey their safety instructions. I will be responsible for knowing my own limitations. I understand that instructors cannot watch me like teachers can in PE class. I will be responsible for my movement choices.

I am healthy, and my doctor says I can participate in exercise. I do not have any medical problems that prevent me from exercising. I do not have any conditions that increase my risk of injury.

My legal guardian(s) and I agree not to sue the InPACT@Home program or staff. We release instructors of any and all blame if I get injured. We are responsible if I get injured while exercising.

InPACT@Home Parent Consent and Waiver

I understand there is an inherent risk associated with any exercise program, including my child's voluntary participation in InPACT@Home, that may result in injury. The online exercise videos will challenge my cardio-respiratory and musculoskeletal systems, and I understand and am aware that certain components of the exercise videos are potentially hazardous activities and may cause injury.

I understand that my child may receive group exercise advice during class. I will take responsibility for knowing my child's limitations and decide if those directions are good for my child, individually. I also understand that for online exercise videos, the instructor cannot watch my child individually the same way a teacher can in a PE or exercise class, and I take responsibility for my child's movement choices.

I acknowledge that my child has either had a physical examination, and/or I have given my permission as their parent or guardian to participate in this home-based exercise program. I do hereby assume all responsibility for my child's participation in any exercise activity associated with InPACT@Home.

I certify that my child is physically well and suffering from no medical problems, conditions, impairments, diseases, or any other illness that would prevent their participation or increase their risk of injury and/or illness as a result of partaking in any exercise program.

I, my heirs, and legal representatives, do hereby waive and release, and agree not to sue, the InPACT@Home program partners, instructors, assistants and employees of any and all liability and responsibility from injury, accident, illness, death, and/or legal and medical fees sustained now or in the future resulting from my child's participation in any program activity or use of equipment.