

PARTICIPANT CONSENT, WAIVER AND RELEASE FROM LIABILITY
For Aaron Ogden Personal Training INC.
Cycling

In consideration of the services of Aaron Ogden Personal Training INC., their officers, agents, employees, and all other persons or entities associated with those businesses (hereinafter collectively referred to as AOPT) I agree as follows:

Although AOPT has taken reasonable steps to provide you with appropriate equipment and skilled guides so you can enjoy an activity for which you may not be skilled, we wish to remind you this activity is not without risk. Certain risks cannot be eliminated without destroying the unique character of this activity. The same elements that contribute to the unique character of this activity can be causes of loss of or damage to your equipment, accidental injury or illness or, in extreme cases, permanent trauma or death. We do not want to frighten you or reduce your enthusiasm for this activity, but we do think it is important for you to know in advance what to expect and to be informed of the inherent risks. The following describes some, but not all, of those risks:

Mountain biking is usually accompanied by beautiful mountain scenery. Those same beautiful mountains pose a risk of injury or even death. Natural forces, changing trail conditions, changing weather conditions, vehicles, variable light conditions, wild life, obstacles that are hidden such as but are not limited to, trees, roots, tree branches, rocks, creeks, obstructed view of trail, on coming riders, forest deadfall, holes, are possible risks that again may cause injury or even death. Cyclist may become lost or separated from their cycling guides or cycling companions by skiing in forested areas, wild and rugged terrain, or bad weather. Communication in this mountain terrain is always difficult and in the event of an accident, rescue and medical treatment may not be immediately available. Furthermore, AOPT employees have difficult jobs to perform. They seek safety, but they are not infallible. They might be unaware of a participant's fitness or abilities. They might misjudge the weather, the elements, or the terrain. They may give inadequate warnings or instructions, and the equipment being used might malfunction.

I am aware that this activity entails risks of injury or death to myself. I understand that the description of these risks is not complete and that other unknown or unanticipated risks may result in injury or death. I agree to assume responsibility for the risks identified herein and those risks not specifically identified. My participation in this activity is purely voluntary, no one is forcing me to participate, and I elect to participate in spite of the risks. I certify that I am fully capable of participating in this activity. Therefore, I assume full responsibility for myself, including my minor children, for bodily injury, death, and loss of personal property and expenses thereof as a result of those inherent risks and dangers and of my negligence in participating in this activity.

I agree not to sue Aaron Ogden Personal Training INC. along with any parent companies, affiliates, and respective employees, for any injuries, death, losses, damages, claims, liabilities or expenses that are caused or alleged to be caused by their negligent or reckless acts or omissions, or the condition of the property, facilities or equipment used for cycling.

I agree to wear appropriate safety equipment, as established by AOPT, during the entire activity. In connection with any injury or other medical conditions I may experience during the cycling activity, I authorize first aid treatment deemed necessary by Aaron Ogden if I am not able to act on my own behalf. I agree not to sue Aaron Ogden, Aaron Ogden Personal Training INC., and any respective employees, who may provide first aid treatment to me for malpractice.

I have read, understood, and accepted the terms and conditions stated herein and acknowledge that this agreement shall be effective and binding upon myself, my heirs, assigns, personal representative, estate and for all members of my family, including any and minors accompanying me. I acknowledge I am not relying on any oral, written, or visual representations or statements made by AOPT including those made in its brochures or other promotional material, to induce me to participate in this activity.

Signature of Participant _____ Date _____

Print Name _____

If under 18 signature of parent or guardian _____

Print Name _____

Address _____

Phone _____

