Akron Central Schools

Community Education

47 Bloomingdale Avenue Akron, New York 14001 (716) 542-5039 Fax (716) 542-5073

Fitness Center Waiver

2025-2026 School Year

I hereby covenant and agree to release and hold harmless the Akron Central School District (which includes the Akron/Newstead Community Education Program) from and against any and all liability, loss, damages, claims, or actions (including costs and attorney fees) for bodily injury and /or property damage, to the extent permissible by law, arising out of participation in the weight training/cardiovascular fitness training programs or the use of any equipment located therein.

I understand participation in the Fitness Center activities involves rigorous physical activity and risks of physical injury. I assume these risks. I hereby consent to emergency transportation and treatment in the event of illness or injury. I hereby accept responsibility for the payment of any emergency transportation or treatment. I further certify that I am in good physical condition. I have no medical or physical conditions that would restrict my participation in this event.

Participant is:		Community Member
		Employee
		Student
		FC Monitor
Participant Na	me	
Signature		
Date		