

Rules and Regulations

* All memberships include an orientation session to familiarize you with the equipment and its proper use. This session must be completed before you begin any unsupervised use of the fitness equipment.

* Allowing others in the facility is prohibited.

* Members must follow directions from staff with respect regarding equipment use and limitations/instructions concerning exercise.

* Your membership may not be used by or assigned to another person.

* Each member is responsible for proper use of exercise equipment. All equipment should be cleaned by the member after each use and returned to its original setting and position.

* Any equipment or other property damaged or destroyed at Wilber Wellness due to negligence or willful misuse of the member will be repaired or replaced at the members expense and may result in a loss of membership privileges at our discretion.

* Each member must use his or her 24-hour access card when entering the facility.

*Wilber Wellness prohibits anyone from entering the facility during unstaffed hours that is not a 24-Hour access member. No guest are permitted. If you are caught permitting a guest to come in, we will automatically charge your account in the amount of \$75.00

* Persons under the age of 16 may not use the facility during unstaffed hours without being accompanied by an adult member.

*Wilber Wellness will be CLOSED to all members during Czech Days held the first weekend in August beginning Thursday night at 10:00 pm through Sunday of every year.

Release and Waiver of Liability

I, the undersigned, hereby request permission to participate in weight training and cardiovascular training at Wilber Wellness in Wilber, NE. I acknowledge that voluntary participation involves a risk of injury. I hereby assume all risk of injury that may be sustained in connection with such participation and agree to hold Wilber Wellness, its employees and agents harmless from any and all claims with respect thereto.

In consideration of the permission granted to the undersigned to participate in the aforementioned training, I do hereby release and discharge Wilber Wellness, its employees and agents from any and all liability and do further waiver and relinquish any and all rights I may have to negligence, other fault or unavoidable accident, resulting from my participation in activities through Wilber Wellness.

The undersigned participant hereby accepts the risk associated with participation in weight training and cardiovascular training and certifies to be of sound medical health. The undersigned hereby agrees to all terms and conditions as herein set forth.

The undersigned states that they have carefully read the above and foregoing document; the undersigned knows the contents thereof have been accurately and truly given and sign the same of their own free act. If the undersigned participant is under the age 18, they will need a parent's authorization and signature below.

Participant Signature Date

Guardian's Signature Date

Additional Signature Date

Additional Signature Date

WILBER WELLNESS

**211 WEST THIRD
PO BOX 642
WILBER, NE 68465**

**PHONE: 402 821-3073
WILBER CHIROPRACTIC
PHONE: 402 821-3320
WILBER PHYSICAL THERAPY**