



# **VIGOR FITNESS CAMPS & TOURISM PVT. LTD.**

WZ-71, Dasghara, New Rajinder Nagar, New Delhi-110012, Contact: 8800488881, 9999977038

## **Registration-Cum-Undertaking Form**

Name: \_\_\_\_\_

S/o Sh. \_\_\_\_\_ DOB \_\_\_\_\_

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

\_\_\_\_\_

\_\_\_\_\_

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

Emergency Contact Number: \_\_\_\_\_

Emergency Contact: Name \_\_\_\_\_

## **PARENTS/ GUARDIAN CONSENT**

This is to certify that my ward, Ms/Mr \_\_\_\_\_  
studying in the Dept. of \_\_\_\_\_  
at \_\_\_\_\_,  
is going to the adventure Camp being held at \_\_\_\_\_  
from \_\_\_\_\_ to \_\_\_\_\_, which is being organized  
by Vigor Fitness Camps & Tourism Pvt. Ltd. I hereby give my consent for the same  
and its into my knowledge that my daughter is going on the trip.If any accident  
occurs during the trip nobody is responsible for it.

Signature of the Parent/Guardian:

Name of Parent/Guardian:

Mobile number:

Dated:



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## Informed Consent and Liability Waiver

This release is entered into between the individual registering for Adventure cum Fitness Camp and Vigor Fitness Camps & Tourism Pvt Ltd., its members, employees, officers, affiliates, trainers and executives as well as the title holders of all private and public locations where Adventure cum fitness camps are conducted.

I, \_\_\_\_\_, wish to participate in \_\_\_\_\_ Camp offered by Vigor Fitness going to be held from \_\_\_\_\_ to \_\_\_\_\_.

I am the individual registering for this programme and hereby agree to the following:

1. I understand there are risks of being causality in participating in a program of strenuous exercise in the adventure camp. Consequently I have been examined by a physician of my choice and obtained his/her approval for my participation in this program within sixty (60) days of the date set forth below. No change has occurred in my physical condition since the date such approval was given which might affect my ability to participate in the Program.
2. I understand that if a change in my health or physical condition does occur which might affect my ability to participate in the Program or otherwise exercise safely, that I will immediately notify Vigor Fitness Camps & Tourism Pvt. Ltd.
3. I agree that Vigor Fitness Camps & Tourism Pvt. Ltd shall not be liable or responsible for any injuries to me resulting from my participation in the Camp (whether at home or a health club or corporate, commercial, residential or other fitness facility) and I expressly release and discharge Vigor Fitness Camps & Tourism Pvt. Ltd, its owners, employees, agents and/or assigns, from all claims, actions, judgments and the like which I or my heirs, executors, administrators or assigns may have or claim to have as a result of any injury or other damage which may occur in connection with my participation in the Program, excepting only an injury caused by the gross negligence or intentional act of such person or persons. This release shall be binding upon my heirs, executors, administrators and assigns.
4. I understand that whenever I will feel light headed, faint, dizzy, nauseated or experience pain/discomfort during the camp, I will stop the activity and inform the trainer/coach of the Vigor Fitness Camps & Tourism Pvt. Ltd.
5. I understand that I am not obligated to perform nor participate in any activity that I do not wish to do, and that is my right to refuse such participation at any time during my personal training session.
6. I hereby affirm that, subject to the medical details supplied by me on the registration form that follows, I am in good health and **I warrant the accuracy of all information supplied by me when registering.** I believe that I am capable of participating in the fitness activities provided by Vigor Fitness Camps & Tourism Pvt. Ltd. and I undertake, if at any time they appear too difficult or strenuous for me or likely to impair my health in any way, to inform the fitness instructor immediately and not to continue any fitness activity which I feel endangers me or my health in any way.
7. I acknowledge that trainers of Vigor Fitness Camps & Tourism Pvt. Ltd. are not physicians and are not trained in any way to provide medical diagnosis, medical treatment, or any other type of medical advice. Furthermore I am aware that it is always advisable to consult a physician before embarking on any new adventure activity.
8. In the event of my suffering any medical or health difficulty whilst performing any physical activity, and particularly where I may lose consciousness or be unable to deal with matters myself, **I hereby authorise** Vigor Fitness Camps & Tourism Pvt. Ltd. **to contact a physician and to take me to such physician and/or any appropriate medical clinic or other hospital and to use the services of an ambulance where appropriate and I undertake liability for all costs thereby incurred.** I am aware of all inherent dangers during the trip. I acknowledge and understand **I will be engaging in activities that involve risk of serious injury, including permanent disability or death and severe social and economic losses** which might result not only from my own action, inaction or negligence, but action, inaction or negligence of others, or the condition of the premises on or off site or of any equipment used and further, **that there may be other unknown risks not reasonably foreseeable at this time. I assume all these risks and expressly waive, release, discharge and agree not to sue** Vigor Fitness Camps & Tourism Pvt. Ltd. **for any loss, damage, death, disability, injury, or action of any kind for participating in this camp or any other activities organized by Vigor Fitness Camps & Tourism Pvt. Ltd. and I hereby indemnify and hold** Vigor Fitness Camps & Tourism Pvt. Ltd. **harmless against any claims by my dependents or other third parties whatsoever arising by reason of my death, disability or injury whilst participating in Adventure Camp.**
9. I am aware that Adventure Boot Camp does not accept responsibility for any loss, theft and/or damage to vehicles and/or personal property left in vehicles or any other area at the location I am training at the camp.
10. I understand and accept that no refunds, whether in whole or in part, will be granted if I cannot complete the camp. I have read, understand and accept the terms and conditions above.
11. I agree that this constitutes the entire agreement between me and Vigor Fitness Camps & Tourism Pvt. Ltd. and I acknowledge that I conclude this Agreement of my own free will without force or coercion and not having been induced to do so by reason of any representations on the part of Vigor Fitness Camps & Tourism Pvt. Ltd. **and any agreement to terminate this Agreement or to amend or vary it in any way, shall not be of any force or effect unless and until reduced to writing and signed by the relevant parties**
12. **Cancellation Policy: Before 28 February 2016, we will refund your whole amount expect registration fees (Rs 1000/-). Between 28 February 2016 to 5 March 2016, we will refund 60% amount. After 5 March 2016, No amount will be refunded.**

I have read this Release and Terms of Agreement and understand all of its terms. I sign it voluntarily and with knowledge of its significance.

Student Name:

Signature/ Date: