



# DYNAMIC SPEED & FITNESS

## Registration Form

NAME: \_\_\_\_\_ AGE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PARENT EMAIL: \_\_\_\_\_

EMERGENCY CONTACT #1 (Name, Cell #): \_\_\_\_\_

EMERGENCY CONTACT # 2 (Name, Cell #): \_\_\_\_\_

ALLERGIC REACTIONS: \_\_\_\_\_

The Dynamic Speed and Fitness, LLC Waiver:

I, the above named parent of guardian, give sole permission to my child to participate in Dynamic Speed and Fitness programs. My child is in good health and able to participate without restrictions. Classes and training sessions at Dynamic Speed and Fitness as with any athletic activity run the risk of injury, all such risks known by me. I agree to abide by any decision of a Dynamic Speed and Fitness trainer regarding safe athletic/fitness practices. By signing this release I will not hold Dynamic Speed and Fitness or any of their representatives responsible for any loss incurred by activity.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

724 Bloomfield Ave  
Verona, NJ 07044  
(973) 239 – 6422

[www.dynamicspeedandfitness.com](http://www.dynamicspeedandfitness.com)