



**Heritage School
Strength and Conditioning and Weight Equipment Usage
WAIVER & PERMISSION TO TREAT FORM
Faculty & Parents**

(PLEASE SIGN AND RETURN THIS PAGE TO THE ATHLETIC OFFICE)

Heritage School gives permission to _____ to use the
(print your name)

strength and conditioning equipment (including the weight room) before/after school hours and/or during the designated Summer Weight Equipment Usage days and times. Strength and conditioning and weight room usage should not coincide or conflict with scheduled student activities utilizing the equipment. I agree to abide by the rules and guidelines for using the equipment responsibly.

I also understand that by signing this form I am waiving responsibility of Heritage School and any of its full-time or part-time employees or coaches contracted by Heritage School in the event that I am injured.

If I use the weight training equipment, I understand that Heritage School will not provide adult supervision and will not be responsible for my use or misuse of the equipment. I agree that I will be personally responsible for any injury to myself and/or damage to the weight training equipment.

By signing this form I also agree to allow to be treated by a physician if I am injured and I am not available to give verbal permission.

PRINT NAME (adult participant) Grade

SIGNATURE (adult participant) Date