



THE SCHOOL BOARD OF MARION COUNTY, FLORIDA

Voluntary Employee Exercise Program Participant's Release/Waiver of Liability and Hold Harmless Agreement

I, _____ have been informed and know the risks involved in participating in any voluntary employee exercise programs provided by THE SCHOOL BOARD OF MARION COUNTY, FLORIDA ("SBMC"), including use of any Fitness Centers, Exercise Equipment, Exercise Programs, or participation in approved on-campus exercise activities ("PROGRAMS") not provided by SBMC. I understand that serious injury, and even death, is possible in such participation and I choose to accept such risk. I voluntarily accept any and all responsibility for my own safety and welfare while participating in PROGRAMS, with the full understanding of the risks involved. I hold harmless and release SBMC its members, officers, employees, and agents, of any and all responsibility and liability for any injury or claim resulting from my participation in this event.

In consideration for being allowed to participate in PROGRAMS, I for my heirs, executors and administrators, release and forever discharge SBMC, its representatives, employees and agents of all liability, claims, actions, damages, and costs/expense I may have against them arising out of or in any way connected with my participation in PROGRAMS. I understand that this Release/Waiver of Liability and Hold Harmless applies to any claim, even those based upon the direct negligence, actions or in actions of those referenced above, including SBMC.

The undersigned participant's participation in PROGRAMS is not a regular, direct or indirect condition of the participant's employment with SBMC. The undersigned participant has not been threatened, coerced, induced or promised anything whatsoever to participate in PROGRAMS, nor have there been any attempts by any person or entity to do so. Instead, the participant enters into this agreement of his/her own free will and acknowledges that this agreement is entered into in good faith on the part of the undersigned participant and SBMC. Further, SBMC expressly makes no request or requirement for the undersigned participant to participate in PROGRAMS, nor is participation in PROGRAMS a precondition to employment or continued employment with SBMC. SBMC receives no regular, direct or indirect benefit from the undersigned participant's involvement in PROGRAMS, except for a possible improvement in the undersigned participant's health, welfare and morale that is common to all kinds of recreational and social activities. The undersigned participant's participation in PROGRAMS is purely voluntarily on the part of the undersigned participant, who understands his/her participation in PROGRAMS is not required either expressly or impliedly or otherwise by SBMC as an incident of the participant's employment with SBMC. The undersigned participant, therefore, when engaging in PROGRAMS, including but not limited to any travel related thereto, is not engaged in the course and scope of employment with SBMC. Further, the undersigned participant agrees not to accept and is not entitled to receive any wages, money or other compensation for employment with SBMC while engaging in or preparing to engage in PROGRAMS, including but not limited to, any travel related thereto.

I HAVE READ THIS RELEASE/WAIVER OF LIABILITY AND HOLD HARMLESS AGREEMENT, FULLY UNDERSTAND ITS TERMS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

Signature: _____ Date: _____

Print Name: _____

PAR-Q AND YOU

(A Questionnaire for People Aged 15 to 69)

Regular physical activity is fun and healthy, and increasingly more people are starting to become more active every day. Being more active is very safe for most people. However, some people should check with their doctor before they start becoming much more physically active.

If you are planning to become much more physically active than you are now, start by answering the seven questions in the box below. If you are between the ages of 15 and 69, the PAR-Q will tell you if you should check with your doctor before you start. If you are over 69 years of age, and you are not used to being very active, check with your doctor.

Common sense is your best guide when you answer these questions. Please read the questions carefully and answer each one honestly: check YES or NO.

YES	NO	
<input type="checkbox"/>	<input type="checkbox"/>	1. Has your doctor ever said that you have a heart condition <u>and</u> that you should only do physical activity recommended by a doctor?
<input type="checkbox"/>	<input type="checkbox"/>	2. Do you feel pain in your chest when you do physical activity?
<input type="checkbox"/>	<input type="checkbox"/>	3. In the past month, have you had chest pain when you were not doing physical activity?
<input type="checkbox"/>	<input type="checkbox"/>	4. Do you lose your balance because of dizziness or do you ever lose consciousness?
<input type="checkbox"/>	<input type="checkbox"/>	5. Do you have a bone or joint problem (for example, back, knee or hip) that could be made worse by a change in your physical activity?
<input type="checkbox"/>	<input type="checkbox"/>	6. Is your doctor currently prescribing drugs (for example, water pills) for your blood pressure or heart condition?
<input type="checkbox"/>	<input type="checkbox"/>	7. Do you know of <u>any other reason</u> why you should not do physical activity?

If
you
answered

YES to one or more questions

Talk with your doctor by phone or in person BEFORE you start becoming much more physically active or BEFORE you have a fitness appraisal. Tell your doctor about the PAR-Q and which questions you answered YES.

- You may be able to do any activity you want — as long as you start slowly and build up gradually. Or, you may need to restrict your activities to those which are safe for you. Talk with your doctor about the kinds of activities you wish to participate in and follow his/her advice.
- Find out which community programs are safe and helpful for you.

NO to all questions

If you answered NO honestly to all PAR-Q questions, you can be reasonably sure that you can:

- start becoming much more physically active — begin slowly and build up gradually. This is the safest and easiest way to go.
- take part in a fitness appraisal — this is an excellent way to determine your basic fitness so that you can plan the best way for you to live actively. It is also highly recommended that you have your blood pressure evaluated. If your reading is over 144/94, talk with your doctor before you start becoming much more physically active.

DELAY BECOMING MUCH MORE ACTIVE:

- if you are not feeling well because of a temporary illness such as a cold or a fever — wait until you feel better; or
- if you are or may be pregnant — talk to your doctor before you start becoming more active.

PLEASE NOTE: If your health changes so that you then answer YES to any of the above questions, tell your fitness or health professional. Ask whether you should change your physical activity plan.

Informed Use of the PAR-Q: The Canadian Society for Exercise Physiology, Health Canada, and their agents assume no liability for persons who undertake physical activity, and if in doubt after completing this questionnaire, consult your doctor prior to physical activity.

No changes permitted. You are encouraged to photocopy the PAR-Q but only if you use the entire form.

NOTE: If the PAR-Q is being given to a person before he or she participates in a physical activity program or a fitness appraisal, this section may be used for legal or administrative purposes.

"I have read, understood and completed this questionnaire. Any questions I had were answered to my full satisfaction."

NAME _____

SIGNATURE _____

DATE _____

SIGNATURE OF PARENT _____
or GUARDIAN (for participants under the age of majority)

WITNESS _____

Note: This physical activity clearance is valid for a maximum of 12 months from the date it is completed and becomes invalid if your condition changes so that you would answer YES to any of the seven questions.



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