

SEAL Fit Challenge Camp Application

849 Second Street, Encinitas, CA 92024

Tel: 760-230-6754 Fax: 800-878-9228

Camp Date: _____

Sales Order#: _____

Candidate Information

Last Name _____ First Name _____

Street Address _____ City _____ State _____ Zip _____

Gender _____ Age _____ DOB _____ Home Phone _____ Cell Phone: _____

Email Address _____

Candidates must be 18 or over to attend; 16-17 with parental consent.

Parent or Guardian Information (If 16-17 years of age.)

First Contact _____ Second Contact _____

Daytime Phone _____ Daytime Phone _____

Cell Phone _____ Cell Phone _____

Email _____ Email _____

Emergency Contact

Name _____ Phone _____ Relationship _____

Please register me for the following:	Quantity	Total	<ul style="list-style-type: none">• Payment is due in full with submission of application in order to reserve your spot. If your application is not approved, you will be refunded 100%. No refunds will be issued 7 days prior to the event for those accepted, but who change their plans.• All applicants must complete the attached Health Form and submit with the application.
Military/Law Enforcement/ First Responder - \$579 per applicant	_____ @	\$ _____	
Professional - \$795 per applicant	_____ @	\$ _____	

PLEASE NOTE: The Director reserves the right to withdraw any candidate whose influence or actions are deemed harmful or who will not abide with rules and policies of the camp. In the event of dismissal or withdrawal, refunds are not possible. I certify that I have read and understood the information detailed in this application and that the information I have given and released is true and correct.

EMERGENCY CARE: In case of emergency if parent or guardian cannot be reached, I hereby grant permission for US Tactical, Inc. to notify the local Emergency Department to provide urgent medical treatment for myself or child, including sutures and X-rays, if necessary.

Signature of Candidate _____ Date _____

Signature of Parent/Guardian (If 16-17 years of age) _____ Date _____



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849 Second Street Encinitas, CA 92024
760.634.3825

HEALTH ASSESSMENT

Use back of form if necessary

Start Date: ___/___/___

Name: _____ Date of Birth: ___/___/___

Address: _____ City: _____ State/Zip: _____

Phone: _____ E-mail: _____

Emergency Contact: _____

Emergency Phone: _____

Gender (Please circle one): Male Female

Program (Please circle one of the items below):

Single Pass Annual Pre-Paid Monthly Unlimited Military/ Fire/ Police 10 Class Pass

The US CrossFit (NavySEALs.com SEAL Fit) exercise regimen consists of constantly varied functional exercises performed at high intensity. While the movements are relatively safe when done correctly, they can be dangerous if executed improperly, at too great a load (weight), or at too high a level of intensity. It is important to practice consistency before intensity, and to understand the inherent risks involved in any exercise program.

Table with 3 columns: Question, Yes / No, Explain. Rows include: Do you have any form of heart disease?, Do you experience shortness of breath or chest pains?, When was your last full Physical Exam?, Do you currently have a workout regimen?, How many times per week?, Is there any reason that you know of that you should not participate in an exercise program?

Do any of the following pertain to you?

High Blood Pressure?	Yes / No	Explain:
Cigarette Smoking?	Yes / No	Explain:
Diabetes?	Yes / No	Explain:
Family history of heart disease?	Yes / No	Explain:
Are you taking any medications?	Yes / No	Explain:

Do you have problems in any of the following areas?

Knees?	Yes / No	Explain:
Lower Back?	Yes / No	Explain:
Neck / Shoulders?	Yes / No	Explain:
Hip / Pelvis?	Yes / No	Explain:
Other?	Yes / No	Explain:

Please list anything else that US CrossFit (NavySEALs.com SEAL Fit) should know regarding your health prior to starting a physical training program. _____

Signature



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STATEMENT OF ASSUMPTION OF RISK,
RELEASE AND INDEMNIFICATION

Name: _____ Date of Birth: ___/___/___

Address: _____ City: _____ State/Zip: _____

Phone: _____ E-mail: _____

Participant. I, _____, agree to participate in one or more physical fitness programs, classes, workouts or events sponsored or held by US CrossFit (NavySEALs.com SEAL Fit), which may include but does not require, and is not limited to, one or more of the following: initial assessment, introductory training, personal training and/or coaching, CrossFit training, and/or physical fitness training, and/or assistance or instruction of any kind, by CrossFit and/or any affiliate, subsidiary or partnership of US CrossFit (NavySEALs.com SEAL Fit) . Prior to participating, US CrossFit (NavySEALs.com SEAL Fit) has made me fully aware that the fitness programs/classes which US CrossFit (NavySEALs.com SEAL Fit) offers and in which I desire to participate are of a nature and kind that are extremely strenuous and can/may push me to the limits of my physical abilities. I recognize and understand that the programs/classes and exercises undertaken therein are not without varying degrees of risk, which may include, but are not limited to the following: muscle soreness, minor aches and pains, tiredness, stiff joints and muscles, tearing of muscles, ligament, muscle, tissue or bone tearing or breakage, serious and/or life-threatening injuries to the musculoskeletal and/or cardio respiratory systems, serious bodily injury or death. Initials: _____

Statement of medical condition. I realize that US CrossFit (NavySEALs.com SEAL Fit) offers training programs that are difficult for very fit persons, including elite athletes, competitive athletes, and combat-ready troops. Knowing this to be the case, I do hereby state and certify that I receive periodic medical check-ups at least once a year, that I have had a physical examination from a competent physician within the past 12 months, and that I have no cardiovascular or other concerns, problems or illnesses that might keep me from participating in a CrossFit training program, such as (but not limited to) heart problems, lung problems, circulatory problems, diabetes, high blood pressure, low blood pressure, hardening of the arteries, shortness of breath, chest pains, arrhythmia, heart palpitations, arterial dysfunction, circulatory disorders, or other condition that would raise concern in the mind of a reasonable person. I have no knowledge of any other medical problem or condition or problem that might increase my risk of illness and injury as a result of participation in such a program. US CrossFit (NavySEALs.com SEAL Fit) has fully and carefully informed me that I may experience adverse physical changes during and/or after exercise, such as joint or muscular aches and/or pain, swelling, abnormal blood pressure, fainting, disorder of heart rhythm, stroke, and in very rare instances, heart attack or even death, and again, I fully understand this to be the case. With my full understanding of this information, I again agree to assume any and all risk associated with my participation in US CrossFit (NavySEALs.com SEAL Fit) fitness programs/classes. Initials: _____

Assumption of All Risks. For and in consideration of being allowed to participate, I do hereby intentionally, willingly and voluntarily assume full responsibility for any and all risks of injury, including serious bodily injury or death, as stated above, to which I may be exposed as a result of my participation in US CrossFit

(NavySEALs.com SEAL Fit) physical fitness programs, classes, workouts or events. I accept full and complete responsibility for any injury or death, **including expressly any injury or death that which results from my own negligence.** **Initials:** _____

Release. For and in consideration of being allowed to participate, and in recognition of the above-mentioned risks and hazards, I do hereby intentionally, willingly and voluntarily release, waive, remise and discharge US CrossFit (NavySEALs.com SEAL Fit), its agents, officers, principles, and employees, and each of their heirs and assigns from any and all claims and causes of action, known or unknown, including any liability, claim, demand, action or right of action arising or out of my participation in the above-referenced activities. **Initials:** _____

Indemnification: I recognize that there is risk involved in the types of activities offered by US CrossFit (NavySEALs.com SEAL Fit). Therefore I accept financial responsibility for any injury that I or the participant may cause either to him/herself or to any other participant due to his/her negligence. Should the above mentioned parties, or anyone acting on their behalf, be required to incur attorney's fees and costs to enforce this agreement, I agree to reimburse them for such fees and costs. I further agree to indemnify and hold harmless US CrossFit (NavySEALs.com SEAL Fit), their principals, agents, employees, and volunteers from liability for the injury or death of any person(s) and damage to property that may result from my negligent or intentional act or omission while participating in activities offered by US CrossFit (NavySEALs.com SEAL Fit). **Initials:** _____

Binding upon heirs and assigns; laws; venue. This release and all other terms and conditions hereof shall be binding upon me, my successors, representatives, heirs, executors, assigns, or transferees. If any portion of this agreement is held invalid, I agree that the remainder of the agreement shall remain in full legal force and effect. This agreement shall be interpreted according to the laws of the State of California and venue for any litigation arising out of or relating to this document shall be exclusively in San Diego County, California. **Initials:** _____

I have read the foregoing document. I understand it. I have been given a full and complete opportunity to ask any and all questions regarding it. I understand that by signing it, I am waiving and otherwise affecting my valuable legal rights. It is my intention to do so.

_____ / ____ / _____
Participant Date

1. What is the purpose of this event?

The SEAL Fit challenge camp was created to TEACH you how to train like a warrior. We do not want you to just experience SEAL training, but to learn how to prepare yourselves physically and mentally to succeed like a SEAL - whether in SEAL training itself or in any endeavor in life.

2. What the event is NOT:

The camp is not an event where you will have a bunch of ancient SEAL instructors screaming in your face. We will be firm, hold you accountable, but we are not going to harass you. We cram 10 lbs into a 5 lb bag so there is not time for anything but serious physical and mental toughness training.

3. Where is the NavySEALs.com training center?

The center is at 849 Second Street in Encinitas, CA. 92024. 760-634-3825 is the center phone. (760) 230-6751 is the HQ phone. From SD airport it is North on the I-5 to Encinitas Blvd, West to Highway 101 South. South into Encinitas and right on H street to Second. We are on the corner of H and Second. From LA or Orange County take the 5 south to Encinitas Blvd. Time from SD is 35 minutes. From OC 45 minutes. From LA 1.5 hours. The sign in the window says "US CrossFit" which is our CrossFit affiliate name.

4. Do I qualify for the Military/Law Enforcement/First Responder price of \$579?

If you are an active duty or reserve military, or a First Responder (Fire, Police), you pay \$579. If you are a working stiff and doing this to challenge yourself and get stronger, then it is \$795.

5. What gear do I need to bring?

- 1 pair of Woodland Cammies
- 1 floppy hat
- 1 pair of running (or broken in) boots
- 5 pairs of socks
- 2 white t-shirts
- 2 pairs PT shorts
- 1 pair running shoes
- 1 pair of swim fins
- 1 mask
- Warm jacket
- Watch
- Money and / or credit cards for incidentals
- Toiletries / shave kit
- Supplements (if you use them)
- A winning attitude

6. How can I prepare?

Train hard and smart. Do the NavySEALs.com SEAL Fit virtual coaching program. See

<http://www.navyseals.com/seal-fit-coaching>

7. I still have questions...who can I talk to?

Call (760-230-6754) or email sarah.dase@ustactical.com

PHOTOGRAPH/MEDIA CONSENT AND RELEASE

I hereby consent and authorize Crossfit Systems, Inc and/or US Tactical, Inc. ("Crossfit Companies") to take photographs or motion pictures of me; or to produce videotapes, audiotapes, closed circuit television programs, web casts, or other types of media productions that capture my name, voice, and/or image (any of the foregoing types of media are called the "Materials" in this Consent and Release form).

I authorize the Crossfit Companies to copyright the Materials, and I authorize the Crossfit Companies to use, reuse, copy, publish, display, exhibit, reproduce, license to third party, and distribute the Materials in any educational or promotional materials or other forms of media, which may include, but are not limited to, catalogs, articles, magazines, brochures, websites or publications, electronic or otherwise, without notifying me.

Please mark one option:

_____ I also agree that Crossfit Companies may identify me by name, and such other identifying information as class year, graduation date, hometown, etc.

_____ I do not wish to be identified by name, etc.

I agree that I am participating on a voluntary basis and I will not receive any payment from Creighton for signing this release or as a result of any publication of the Materials.

Signature

Date

Print Name

