

## **26.2 MARATHON**

### TRAINING PROGRAM



JUNE 1 THROUGH DEC 1

# COACHING PROVIDED BY ROBB BEAMS COMPLETE TRAINING SOLUTIONS

\$150 FOR COACHING uTHROUGH DECEMBER

FIRST NAME LAST NAME

STREET CITY

STATE ZIP

**EMAIL** PHONE

DATE OF BIRTH GENDER SHIRT SIZE

EMERGENCY CONTACT NAME PHONE

#### **REFUND POLICY**

If you discontinue the 26.2 MARATHON training program within 7 days of the first day of class, you will receive a full refund minus a \$15 fee for registration and processing. No refund will be given without the return of program apparel and accessories which must be in new and unused condition. If cancellation occurs after the first 7 days, no refund will be given.

I understand that adverse weather conditions are an inherent possibility in any outdoor exercise class. I understand that adverse weather conditions are out of the control the Fleet Feet Sports training program. I understand that class may be cancelled due to adverse weather conditions, including weather service alerts for dangerous air quality. I understand that no refunds or make-up classes will be given in the event of cancellation for adverse weather conditions.

#### **ACCIDENT WAIVER & RELEASE OF LIABILITY**

I sign this waiver voluntarily. I agree that this release binds my heirs, family, assignees, administrators, and executors. Further, I acknowledge that this athletic event is an extreme test of a person's physical and mental limits and carries with it the potential for death, serious injury and property loss. The risks include, but are not limited to, those caused by terrain, facilities, temperature, weather, condition of athletes, equipment, vehicular traffic, actions of other people including, but not limited to, participants, volunteers, spectators, coaches, event officials, and event monitors, and/or producers of the event, and lack of hydration. These risks are not only inherent to athletics, but are also present for volunteers. I hereby assume all of the risks of participating and/or volunteering in this event. I realize that liability may arise from negligence or carelessness on the part of the persons or entities being released, from dangerous or defective equipment or property owned, maintained or controlled by them or because of their possible liability without fault.

I certify that I am physically fit, have sufficiently trained for participation in the event and have not been advised otherwise by a qualified medical person. I acknowledge that his Accident Waiver and Release of Liability form will be used by the event holders, sponsors and organizers, in which I may participate and that it will govern my actions and responsibilities at said event.

In consideration of my application and permitting me to participate in this program, I hereby take action for my-self, my executors, administrators, heirs, next of kin, successors, and assigns as follows: (A) Waive, Release Discharge from any and all liability for my death, disability, personal injury, property damage, property theft or actions of any kin which may hereafter accrue to my including my traveling to and from the program locations, THE FOLLOWING ENTITIES OR PERSONS: Fleet Feet Sports Orlando, Their directors, officers, employees, volunteers, representatives, and agents, the event holders, event sponsors, event volunteers; (B) Indemnify and hold harmless the entities or persons mentioned in this paragraph from any and all liabilities or claims made as a result of participation in this event, whether caused by the negligence of release or otherwise.

#### **Rules and Regulations**

I hereby consent to receive medical treatment which may be deemed advisable in the event of injury, accident and/or illness during this event.

I understand that at this program or related activities, I may be photographed. I agree to allow my photo, video or film likeness to be used for any legitimate purpose by the event holders, producers, sponsors, organizers and assigns. The Accident Waiver and Release of Liability shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law.

I hereby certify that I have read this document; and, I understand its content.

I agree to additionally fill out the on line additional waivers and forms which will be provided to me to complete the registration.

#### Tier 1 - \$150

- Event Specific Training Plan
- Coach Robb Resources (heart rate calculator, sweat rate calculator, body analysis worksheet, coaching videos)
- Weekly long run with support from Fleet Feet
- Training T and Singlet provided
- Training Program discount for in store purchases
- 10% off Nutritionally Green products

#### Tier 2 - \$175

- Event Specific Training Plan
- Weekly Topic Specific Recorded Phone Call (i.e. Nutrition & Hydration for Marathon Training, How, When & Why to Stretch)
- Individual Performance Report Card
- Coach Robb Resources (heart rate calculator, sweat rate calculator, body analysis worksheet, coaching videos)
- Weekly long run with support from Fleet Feet
- Training T and Singlet provided
- Training Program discount for in store purchases
- 10% off Nutritionally Green products

SIGNATURE	DATE	
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