



BOOTCAMP FITNESS FOR KIDS

**FUN, ENCOURAGING, LAUGHING, LEARNING
WHILE MOVING**

**-an after school & weekend program made just for kids.
1-month fitness program, 3-days per week, 1 hour per day.**

LOCATIONS:

ALPHA CO.

2477 E Fort Union Blvd (7000 So)

Cottonwood Heights, UT 84121

EMAIL US: info@bootcampwithjess.com

CALL US: (801) 419-2330

ECHO CO.

392 E 12300 S Ste F

DRAPER, UT 84020

EMAIL US: echo@bootcampwithjess.com

CALLUS: (801) 631-7231 (801) 520-5662

ONLY \$125

VISIT OUR WEB SITE: @ www.bootcampwithjess.com

**YOU, THE CONSUMER, MAY CANCEL THIS CONTRACT/AGREEMENT AT
ANYTIME PRIOR TO MIDNIGHT OF THE THIRD BUSINESS DAY AFTER
THE DATE ON WHICH THE CONTRACT/AGREEMENT IS EXECUTED.**

Date _____

THE PROGRAM

Geared for children ages 8 – 12 yrs old

Your child will learn how to become a team player as they work in a group. The focus is circuit training with a military style in a fun, energetic atmosphere. We incorporate hydraulic strength training, aerobics, hand eye coordination, paying attention to detail, accountability, commemorative, healthy nutrition, learning proper workout ethics, knowledge of the different muscle groups, building self esteem, calling cadences, working as a team, and creating an I Can attitude.

This program will get your children active again in a fun, encouraging environment. You will see your children improve their overall physical well-being and self confidence while decreasing early onset of diabetes, high blood pressure and obesity.

PAYING ATTENTION TO DETAIL MAKING IT FUN FOR KIDS

1. **P.T. This is your first name during your training. (Physical Trainee)**
2. **Please address the trainer as “Instructor”.**
3. **These positions will be taught to your child but Parent may show the Child each position before hand.**

(PUSHUPS) Starting position is front leaning rest position, which is on your toes and hands. Pushups may also be done on hands and knees.

(PARADE REST) This position you will stand straight up, feet shoulder width apart, toes at a 45 degree, palms over lapped flat at the small of your back.

(ATTENTION) You will stand at a position of attention straight up. Your heels touch together, toes at a 45 degree, hands are closed and rest straight down to the sides of your body. You will look straightforward at all times.

4. **Whenever you finish doing pushups (only ten (10)) you will hear the Instructor say “RECOVER”. You will then stand up at parade rest and say: “P.T. (your last name) WANTS MORE PT. THANK YOU FOR CONDITIONING MY MIND AND MY BODY”. (Instructor will teach children this statement but Parents may teach before hand).**

Make sure your child has proper gear ready and with them at all times:

EQUIPMENT NEEDED (MUST HAVE)

- ◆ **GOOD FOOT GEAR (cleaned at all times of any grass or debris)**
- ◆ **WATER (16 oz no less)**
- ◆ **SMALL TOWEL**

Enrollment \$125.00 / per month, 12 total sessions

Payment types:

All payment must be received three business days prior to first day of training

Cash \$125.00

Check \$125.00 (make checks out to Bootcamp with Jess)

Debit \$125.00

Credit Card Visa / Master Card / Discover \$125.00

A \$20.00 fee will be charged on all return checks. Please ask Instructor if another payment method is needed prior to your begin date.

_____ Cash _____ Check _____ Credit Card _____ Debit

IF BOOTCAMP W/ JESS DBA BOOTCAMP FITNESS FOR KIDS CEASES OPERATION AND FAILS TO OFFER AN ALTERNATE LOCATION WITHIN FIVE (5) MILES, NO FURTHER PAYMENTS UNDER THIS CONTRACT/AGREEMENT SHALL BE DUE TO ANYONE, INCLUDING ANY PURCHASER OF ANY NOTE ASSOCIATED WITH OR CONTAINED IN THIS CONTRACT/AGREEMENT.

ANY PAYMENTS DUE INCLUDING DOWN PAYMENTS, ENROLLMENT FEES, ARE IN EQUAL INSTALLMENTS ACCORDING TO THE RULES AND REGULATIONS.

TERM OF ENROLLMENT IS BASED ON 12 TRAINING DAYS.

Items of equipment or services provided by Bootcamp Fitness for Kids subject to deletion or change at the discretion of Bootcamp Fitness for Kids.

TRAINING SCHEDULE

ECHO CO.

Monday: 7:00 p.m. – 8:00 p.m.

Wednesday: 7:00 p.m. – 8:00 p.m.

Saturday: 9:00 a.m. – 11:00 a.m.

ALPHA CO.

Tuesday: 7:30 p.m. – 8:30 p.m.

Thursday: 7:30 p.m. – 8:30 p.m.

Friday: 4:30 p.m. – 5:30 p.m.

Consent for Picture and or Video Recording:

I, _____ hereby consent to allow pictures to be taken of my child and that possible video recordings may be allowed. This use is only for use by Bootcamp with Jess. Pictures may be available as well as a video DVD per request.

SIGNATURE: _____

**ASSUMPTION OF RISK
AND
RISK OF ACCIDENT**

Bootcamp w/ Jess DBA Bootcamp Fitness for Kids recommends all trainee(s) to see their pediatrician for a physical examination prior to training. In recognition of the hazards connected with any physical activity, parent or guardian of child participant (trainee) hereby knowingly and voluntarily waive(s) any cause of action of any kind whatsoever arising as the result of such activity from which any liability may or could accrue. Any trainee(s) using the equipment or the facilities does so at their own risk per the signed authorization of the Parent or Guardian. It is further agreed that all exercises including the use of any and all machinery, equipment, and apparatus designed for exercising shall be at the Parent or Guardian's signed sole risk for their child. It is also understood that training will sometimes require traveling to specific locations said travel is the specific requirement of the Parent or Guardian and not the responsibility of Bootcamp w/ Jess DBA Bootcamp Fitness for Kids. Parent or Guardian specifically agrees to indemnify Bootcamp w/ Jess DBA Bootcamp Fitness for Kids, for any cause of action other actions in direct connection with of the foregoing including reimbursement for attorneys fees and costs and other requested relief.

Background:

- A. The Parent / Guardian is of the opinion that Bootcamp w/ Jess DBA Bootcamp Fitness for Kids has the necessary qualifications, experience and abilities to provide fitness style programs to the Customer.**
- B. Bootcamp w/ Jess Bootcamp Fitness for Kids is agreeable to providing such services to the Customer on the terms and conditions set out in this Agreement.**

In Consideration of:

Services Provided

- 1. The Customer hereby agrees to engage Bootcamp w/ Jess DBA Bootcamp Fitness for Kids to provide the Customer with services (the "Services") consisting of providing structured fitness style training in a group setting.**

Children

- 2. The Customer agrees to place the following child in the care of Bootcamp w/ Jess DBA Bootcamp Fitness for Kids: _____**

Authorization for Child Access/Release

- 3. The parties agree to the following guidelines surrounding access and release of the child: _____**

Term of Agreement

- 4. The term of this Agreement will begin on the date of this Agreement and will remain in full force and effect until the 12 sessions / 1 month of training is completed subject to extension by mutual written agreement of the parties.**

Compensation

- 5. For the services rendered by Bootcamp w/ Jess Bootcamp Fitness for Kids as required by this Agreement the Customer will pay to Bootcamp w/ Jess Bootcamp Fitness for Kids compensation amounting to \$125.00 per month.**

Authorization to Treat a Minor

6. Bootcamp w/ Jess Bootcamp Fitness for Kids will be furnished with the necessary documentation so they may sanction medical care of the Child in the event of an emergency and the Parent or Guardian cannot be reached.

Time of the Essence

7. Time is of the essence in this Agreement. No extension or variation of this Agreement will operate as a waiver of this provision.

Costs and Legal Expenses

8. In the event that legal action is brought to enforce or interpret any term of this Agreement, the prevailing party will be entitled to recover, in addition to any other damages or award, all reasonable legal costs and fees associated with the action.

Limitation of Liability

9. It is understood and agreed that Bootcamp w/ Jess DBA Bootcamp Fitness for Kids will have no liability to the Customer or any other party for any loss or damage (whether direct, indirect, or consequential) which may arise from the provision of the Services.

By signing below, I state that I have read and understand the assumption of risk and risk of accident and that I voluntarily waive(s) any cause of action of any kind.

Parent / Guardian Name

Date

Signature

Name of Child participating

Age

Home Address

City,

State

Zip

Home / Cell phone #

Email address

Emergency Contact

Other Authorized person to pick up your child

Health History Questionnaire

Has your child had any:

Medical Problems

Yes___ No___ / Hospitalizations Yes___ No___ / Surgeries Yes___ No___

If yes to any please list:

1. _____

2. _____

3. _____

Is Child taking any medications? Yes___ No___

Current Medications / Doses

1. _____

2. _____

3. _____

Has Child had any injuries? Yes___ No___

If yes please list:

1. _____ Date: _____

2. _____ Date: _____

Lung Problems

Wheezing Yes___ No___ Asthma Yes___ No___ Short of breath Yes___ No___

Heart Problems

High blood pressure Yes___ No___ Chest pain or discomfort Yes___ No___

Breathlessness with exertion Yes___ No___ Breathlessness while lying flat Yes___ No___

Swelling of lower extremities Yes___ No___ Heart Attach Yes___ No___ Date _____

Heart Surgery Yes___ No___ Date _____

Muscle or joint pains Yes___ No___ Arthritis Yes___ No___ Gout Yes___ No___

Joint Swelling Yes___ No___

Depression Yes___ No___

Blood clots in the legs or lungs Yes___ No___

Fainting Yes___ No___ Seizure Yes___ No___ Paralysis Yes___ No___ Stroke Yes___ No___

Numbness Yes___ No___ Tingling Yes___ No___ Brain tumor Yes___ No___

Please list any other medical information you feel Instructor Thomas needs to know prior to beginning training. _____

Parent or Guardian Signature _____ Date _____