

# WELCOME TO LIFE TIME

# LIFETIME

THE HEALTHY WAY OF LIFE COMPANY™

## GUEST INFORMATION

NAME \_\_\_\_\_

ADDITIONAL GUESTS \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

PHONE \_\_\_\_\_ AGE \_\_\_\_\_ MALE ☐ FEMALE ☐

EMAIL ADDRESS \_\_\_\_\_

## TELL US ABOUT YOURSELF

WHAT TYPE OF MEMBERSHIP ARE YOU INTERESTED IN?

☐ SINGLE ☐ COUPLE ☐ FAMILY

ARE YOU VISITING AS THE GUEST OF A MEMBER?

☐ YES ☐ NO

WERE YOU REFERRED TO LIFE TIME FITNESS BY A MEMBER?

☐ YES ☐ NO

IF YES, WHAT IS THE REFERRING MEMBER'S NAME?

## FOR OFFICE USE ONLY

GUEST TYPE

☐ WALK-IN

☐ WALK-IN (BLANK PASS)

☐ BUDDY

☐ APPOINTMENT W/ \_\_\_\_\_

☐ EVENT GUEST

☐ GUEST FEE PAID (NON-MEMBER)

☐ HOTEL GUEST

IF APPLICABLE

☐ UNDER 18

☐ OUT OF TOWN

☐ MEMBER WITH MEMBER

HAVE YOU CONTACTED ANYONE REGARDING A MEMBERSHIP?

☐ YES ☐ NO

IF YES, WAS IT BY:

☐ PHONE ☐ WEBSITE ☐ IN PERSON

DO YOU RECALL THE PERSONS NAME?

\_\_\_\_\_

REFERRED BY

MEMBER ID

FRONT DESK

MEMBER ENGAGEMENT ADVISOR

## GUEST USAGE AGREEMENT

**ASSUMPTION OF RISK.** I understand that there are **dangers, hazards and risks** ("Risks") of **injury or damage** ("Injuries") **in the use of premises, facilities, equipment, services, activities or products** ("Use of Life Time Premises and Services") of **Life Time Fitness, Inc., its subsidiaries and affiliates, and all of their employees**, contractors, officers, directors, agents, representatives, sponsors, volunteers and any other entity or person acting for them, and all of their successors and assigns (collectively "Life Time"). Risks may include but are not limited to **slips, trips, collisions, falls, and loss of footing or balance, including "slip and falls" and falls from rock climbing structures or fitness equipment; drowning; equipment failure, malfunction or misuse; property theft, loss or damage, including from lockers or vehicles;** and other accidents or incidents. Injuries may include but are not limited to **major or minor personal, physical, bodily, emotional, mental, economic, property or other types of injuries and damages.** I understand that Risks and Injuries in the Use of Life Time Premises and Services (collectively, "Risks of Injury") **may be caused, in whole or in part, by the NEGLIGENCE OF LIFE TIME**, me, any additional guests including my spouse/partner or children/wards ("Additional Guests"), Life Time members including any sponsoring member ("Members"), and/or other persons including other guests or vendors ("Others"). **I FULLY UNDERSTAND, AND VOLUNTARILY AND WILLINGLY ASSUME, THE RISKS OF INJURY.**

**WAIVER OF LIABILITY; DEFENSE AND INDEMNIFICATION.** On behalf of myself and my spouse/partner, children/wards, Additional Guests, parents, guardians, heirs, next of kin, personal representatives, heirs and assigns, I hereby voluntarily and forever **release and discharge Life Time from, covenant and agree not to sue Life Time for, and waive, any claims, demands, actions, causes of action, debts, damages, losses, costs, fees, expenses or any other alleged liabilities or obligations** of any kind or nature, whether known or unknown (collectively, "Claims") **for any Injuries to me and any Additional Guests** in the Use of Life Time Premises and Services **which arise out of, result from, or are caused by any NEGLIGENCE OF LIFE TIME**, me, Additional Guests, Members and/or Others and, if in Canada, any **breach by Life Time of the Occupiers' Liability Act (Ontario) (collectively, "Negligence Claims")**.

If I, on my own behalf or on behalf of another (including an estate), assert a Negligence Claim against Life Time and/or breach my agreement not to sue Life Time, **I will pay all reasonable fees (including attorneys' fees), costs and expenses incurred by Life Time ("Life Time's Fees and Costs") to defend (1) the Negligence Claims and (2) all other Claims based on the same facts as the Negligence Claim(s).** I also agree to **defend, indemnify and hold Life Time harmless to the fullest extent permitted by law from and against any Claim (including any Negligence Claims) asserted against Life Time by any other person** arising out of, resulting from, or caused by the Use of Life Time Premises and Services by me or my Additional Guests. My agreement to **defend Life Time** means that I will pay all of Life Time's Fees and Costs incurred to defend the Claim from the date the Claim is asserted. My agreement to indemnify and hold Life Time harmless means that I will pay any **settlement, judgment, or other damages, fees or costs of any type** incurred by Life Time to resolve the Claim.

**I CONSENT TO LIFE TIME COLLECTING THE INFORMATION ON THIS FORM AND USING SUCH INFORMATION TO CONTACT ANY GUEST(S) ABOVE FOR MARKETING PURPOSES.**

**I HAVE READ, UNDERSTAND AND AGREE TO ALL TERMS AND CONDITIONS OF THIS GUEST USAGE AGREEMENT, INCLUDING SPECIFICALLY THE ASSUMPTION OF RISK, WAIVER OF LIABILITY AND DEFENSE AND INDEMNIFICATION PROVISIONS UNDER WHICH I AM RELINQUISHING LEGAL RIGHTS.**

GUEST SIGNATURE

DATE

SIGNATURE OF ADDITIONAL ADULT GUEST

DATE

SIGNATURE OF ADDITIONAL ADULT GUEST

DATE

**GUEST VISIT PRIVILEGES ARE COMPLIMENTARY TO SAME GUEST, ONCE EVERY 60 DAYS**