## PARTICIPANT AGREEMENT, RELEASE, CONSENT, AND ASSUMPTION OF RISK ("Agreement")

Participar	nt Na	me ("I" or "my") (print)		
Address _		City	State	Zip
Phone		email		
officers, a	admii	on of the services of <b>Zest Ed, LLC</b> from William Zest and Kymberlie Zesnistrators, sponsors, and all other persons or entities acting in any capd discharge ZED on behalf of myself, my children, my parents, my hei	pacity on their behalf, I he	reby agree to release,
Initials	1.	I understand that I share the responsibility for my safety and satisf ZED. I have reviewed all ZED program information, regulations, and	policies and agree to abi	de by them. I have had
	2.	Instruction to create further confidence and independence is an ess to provide instruction that will be perfectly applicable in all scenario risks, my safety, and the safety of others after and outside of partici	sential element of ZED pro os. I am fully responsible	ograms. It is impossible for my actions, their
	3.	consequences of my learning, understanding and use of any ZED in including use of equipment.  I acknowledge the activities that are taught, included, demonstrated		
	J.	method, subject me to risk. These risks cannot be eliminated witho the activities. It is impossible to anticipate every activity in which I Activities may include but not limited to: sports movements, fitness use of fire, exposure to environmental elements, exposure to peopl I engage in these activities voluntarily and at my own risk.	ut jeopardizing the essen will engage in or risks I w s training, use of machine	tial qualities of ZED and Il be exposed to. ry, use of sharp tools,
	4.	ZED cannot prevent all accidents or eliminate all risk. ZED activities risks include but are not limited to: cuts, bruises, strains, burns, GI ce that risks could include serious bodily injury including permanent	listress, or emotional stre	
	5.	Many ZED activities require that participants are touched by instruction may demonstrate or correct a movement, may reduce risk of injury, Participation touch may be instrumental in meeting the goals of the part of ZED services. At any time I may request not to be touched are expressly acknowledge that I will be touched by instructors or participations.	, or increase awareness o e activity. I am voluntarily nd assume all risk associa	f technique. agreeing to touch as a ed therewith. I
	6.	Without a certain degree of risk and independence I will not be able element of participation in ZED. By signing this Agreement, I expres of the risks and responsibility for losses, costs, and damages by pa	ssly agree and promise to	accept and assume all
	7.	I certify that I have adequate insurance to cover any injury or damage I agree to bear the costs of such injury or damage myself. I further mental condition to participate in ZED activities and I am willing to condition I may have.	certify that I am of suffice	cient physical and
	8.	I hereby voluntarily release, waive, forever discharge, covenant no harmless ZED from any and all claims, demands, or causes of actio participation in ZED activities or my use of ZED equipment or space negligent acts or omissions of ZED.	n, which are in any way o	onnected with my

	ZED has permission to use my photo media postings.	o, image, or video in promoting ZED. This includes website, internet, and social
	My goals are multi-faceted and ther outcome during or after ZED program	re are many variables in achieving them. ZED cannot guarantee any particular ms in working towards my goals.
	to ask questions and understand the reserves the right to change the cos paying ZED for all services it has alre timeline, ZED may charge late fees u	ulated on the ZED website and in the ZED handbook. I have had the opportunity e services, structure, and expectations for myself and ZED. I also understand ZED its of the services it provides from time to time and this does not dismiss me from eady provided. If I fail to pay ZED the agreed upon amount within the established until I have resolved my outstanding balance. ZED may pursue all of the legal outstanding balances and I agree to reimburse ZED for all associated costs,
	Should ZED or anyone acting on the lagree to reimburse ZED for such fe	ir behalf be required to incur attorney's fees and costs to enforce this Agreement ees and costs.
Signature of pa	articipant	Date
In consideration I understand the capacity to ano	he nature and risks of the above refer d further agree to indemnify and hold	CATION der the age of 18 ("Minor") I affirm that I am the Minor's parent or legal guardian renced activities and believe the Minor to be qualified to participate. I have the distance became and all claims which are brought by or on behalf of the chuse or participation by Minor subject to all terms above.
Parent or Guar	rdian Signature	Date
Name (print) _		

I understand and agree to these additional terms: