

## **FITNESS ROOM**

### **RELEASE OF LIABILITY**

I, \_\_\_\_\_, elect to use the equipment In The  
Indiana Hand Center's Fitness Center. I will not hold The Indiana Hand Center liable for any  
injuries resulting from the use of said equipment.

\_\_\_\_\_  
Associate Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Date