

HeartFit Presents
HandsOn Polar
Attendee Private Workshop Registration Form

Each private workshop attendee is required to complete the following information and mail it to the address below.

Coordinator's Name

First _____ Last _____

Attendee Private Workshop Information

First _____	Last _____	Phone _____
Address _____		(Secondary) _____
City _____	State _____	Zip _____
Email _____		

<p>Mail completed registration to: HeartFit PO Box 1653 Beaverton, OR 97075-1653</p>	<p style="text-align: center;">Please include a \$100 check payable to HeartFit. All registrations must be received 7 days prior to the workshop start date. We reserve the right to cancel any workshop do to unforeseen events. A full refund will be given if the workshop is cancelled by HeartFit.</p>
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All attendees in the **HeartFit** sponsored *HandsOn Polar* workshop are required to assume all risk of participation in the workshop by signing this general release statement. The undersigned attendee on behalf of himself/herself and on behalf of attendee's personal representatives, assigns, heirs, executors, hereby fully and forever releases, waives, discharges and covenants not to sue **HeartFit** or any agency whose property and/or personnel are used from all liability to the attendee and his/her personal representatives, assigns, heirs, executors, for all loss(es). The attendee warrants that all statements made herein are true and correct. Attendee has read the foregoing and intentionally and voluntarily signs this release and waiver of liability agreement.

Attendee's Signature _____

Date Signed _____

Confirmed registrants will be emailed with further private workshop details upon receipt of
a completed **Attendee Private Workshop Registration Form**
and a completed **Coordinator Private Workshop Form..**

Visit us on the web at: www.StressThenRest.com