

Olmsted Falls Middle School OFHS Weight Room Program 2013-2014

(Olmsted Falls City School Students only –8th Graders only)

Days: Mondays, Wednesdays, & Fridays

Times: 4:30-6:00 PM

Begins: Monday, March 3

Ends: Friday, May 30

- Students may either take the bus home and be transported to the high school by their parents by 4:30 PM, or
- Students who would prefer to walk to the high school must follow these guidelines:
 - Wait in the OFMS Cafetorium after our 3:30 PM dismissal
 - Sit quietly while waiting in the Cafetorium
 - Walk as a group to the high school **after** all of the middle school busses pull out of the driveway
 - Walk as a group without the supervision of an adult from the middle school
 - Understand that failure to follow these guidelines will result in the loss of access to this weight room program for this school year.
- Our varsity coaches will be supervising and directing these workout sessions.
- Return registration form to Mr. Kurz in the OFMS main office.
- Registration forms must be received by OFMS before any use of the weight room may occur.
- Students must be in good academic and behavior standing in order to participate in this program. Participation may be limited and/or prohibited if students are not in good academic or behavior standing.

If you have any questions, please contact Mr. Kurz at 440-427-6201, or at mkurz@ofcs.net.

Mr. Kurz must sign off on this form before final approval is granted.

**OLMSTED FALLS HIGH SCHOOL
WEIGHT ROOM PARTICIPANT
OFMS 8th Grade Program
March 3 - May 30, 2014**

ASSUMPTION OF RISK

“Participating in vigorous physical activity may lead to the possibility of inadvertent injury. Most physicians recommend a thorough physical exam before undertaking any exercise program (This is strongly recommended for any family history of early heart or health issues and particularly after age 40).

“I attest that I/my son or daughter is medically fit and that I have adequate insurance/hospitalization to cover possible injury that could occur during my/his/her participation.”

“I hereby release THESE FITNESS PROGRAMS from any and all damages for injury to myself/my son or daughter, and hereby waive for myself, my heirs, administrators, executors, and assigns, and any and all others, any claims to damages which I may have against the program or its personnel.”

“I will read the WEIGHT ROOM RULES posted in the Weight Room. I will follow them for my safety and for the safety of others in the room. I understand that if these rules are not followed, appropriate discipline may result.”

(complete this portion)

Name Printed: _____

Signature of Student: _____ **Date:** _____

Parental/Guardian Signature: _____ **Date:** _____

Emergency contact: _____ **Phone:** _____

Secondary contact: _____ **Phone:** _____