



## Running Clinic Athlete Waiver & Release

I acknowledge that running is a test of a person's physical and mental limits and poses risks of serious bodily injury, death, or property damage. With full understanding of the risks I am taking, I HEREBY ASSUME ALL THE RISK OF PARTICIPATION IN THE RUNNING CLINIC(S) FOR TEAM TRIUMPH ON \_\_\_\_\_ and agree to the following:

Alison Headley of TRIumph Coaching LLC has offered to conduct a running clinic to assist me with the improvement of my running form. I have voluntarily signed up for this with the understanding of the safety risks involved in running.

I hereby attest that I am in good health and my physical condition has been verified by a licensed medical doctor and furthermore, that the licensed medical doctor has been advised that I intend to participate in these activities.

I agree that I will not hold Alison Headley or Triumph Coaching responsible for any injury, accident, medical condition, damage, or death that may result from this running clinic. I am doing this voluntarily and recognize the inherent risks in running and any type of triathlon training.

Print Name

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Sign Name

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Date

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