



Name: _____

Email: _____

Phone: _____

Are you participating with a team? ___ Yes ___ No

If yes, what is the team's name? _____

Team Captain: _____

I am interested in finding a workout partner ___ Yes ___ No

What is your favorite types of exercise? _____

I understand that there is a \$10 Entry fee to participate in this program.

I am voluntarily participating in this program and I will not hold any Midway Biggest Loser Volunteer responsible for any damages that I might incur during the course of this program. I also understand that I must have discussed with a medical professional concerning my overall health prior to participation in this program.

Signature

Date