Walk to Afghanistan Registration From

Disclaimer

I understand that participating in any program of exercise, nutrition and lifestyle change has certain risks. I realize that the information I provide to determine my potential risk category and to provide a subsequent exercise and nutrition program. The information I have supplied is correct to the best of my knowledge. I also acknowledge that all participants in any program should consult their physician before embarking on such a program. I take full responsibility for my participation in any of these programs for any claims for injuries or illness that may result from my participation in any of Monti Fitness Center programs.

Participants Name	Phone Number	E-mail address	Team Name	Participants Signature