

FITNESS FOR YOUR LIFE PROGRAM - ENTRY REQUEST

For use of this form see USMEPCOM Reg 350-1

INSTRUCTIONS: Completed by the participant and submitted to commander for approval prior to beginning program. This form is used for athletic activities OTHER THAN for the Run/Walk Program. Annotate progress on USMEPCOM Form 350-1-8-R-E.

To:	From:	Date:
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1. Request entry in the USMEPCOM Fitness For Your Life Program.

I have participated in another command's Fitness For Your Life Program. Documentation for the accumulation of miles is enclosed.

I have not participated in another command's Fitness For Your Life Program.

2. To the best of my knowledge, I am in good health. (Check statement below, if applicable.)

I am over 40 years of age and have obtained a doctor's clearance prior to enrollment.

3. (Civilian Personnel Only) I release USMEPCOM and the U.S. Government from liability for any injuries or damages which I may incur or which arise from my participation in this program.

Typed Name/Rank of Participant	Signature of Participant	Date
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