



PROJECT FIT KID APPLICATION

1. Please fill out the application legibly.
2. Use dark colored ink.
3. Answer all questions honestly and to the best of your ability.
4. Please write only on the printed side of the paper, but feel free to attach additional sheets if necessary.
5. Please attach a non-returnable photo of yourself

Name: _____ Name you go by: _____

Parent's Name: _____

Address: _____

Phone #'s: Home: _____ Applicant's Cell: _____

Parent's Work: _____ Parent's Cell: _____

Applicant's E-mail Address: _____

Parent's E-mail Address: _____

Date of Birth: _____ Gender: M F Height: _____ Weight: _____

Parent's Occupation/Occupations: _____

Current Grade/ Level of Education: _____

School Attending: _____

PART I: YOUR PROFILE

WHO DO YOU LIVE WITH?

GIVE US A BRIEF HISTORY OF YOUR DIETING HISTORY:

MY FAVORITE RESTAURANT IS:

DESCRIBE YOUR FAVORITE MEAL:

DESCRIBE YOUR FAVORITE FOOD:

DESCRIBE YOUR FAVORITE EXERCISE/ACTIVITY:

WHY DO YOU WANT TO LOSE WEIGHT?

HOW MUCH WEIGHT DO YOU WANT TO LOSE?

WHAT DO YOU THINK WOULD BE THE BEST THING ABOUT BEING THIN?

WHAT'S THE HARDEST THING ABOUT BEING OVERWEIGHT?

DO YOU HAVE ANY BAD HABITS YOU WISH YOU COULD CHANGE?

HOW COMPETITIVE ARE YOU?

HOW ATHLETIC ARE YOU?

QUICK FACTS (CIRCLE & ANSWER):

DO YOU SMOKE? Y N COMMENTS: _____

DO YOU DRINK? Y N COMMENTS: _____

HAVE YOU EVER HIT SOMEONE IN ANGER OR SELF DEFENSE? YES / NO (Circle One)

IF SO, TELL US ABOUT IT, HOW OLD WERE YOU, WHAT HAPPENED?

HAVE YOU EVER BEEN TREATED FOR ANY SERIOUS PHYSICAL ILLNESS(ES) OR HAD ANY SERIOUS

INJURIES? YES / NO (Circle One) IF SO, PLEASE DESCRIBE: _____

ARE YOU ON ANY PRESCRIPTION MEDICATION THAT YOU TAKE ON A REGULAR BASIS?

YES / NO (Circle One) IF SO, WHAT AND FOR HOW LONG? _____

DO YOU HAVE ANY ALLERGIES OR MEDICAL CONDITIONS?

YES / NO (Circle One) IF SO, PLEASE DESCRIBE: _____

DO YOU HAVE ANY PHYSICAL CONDITIONS, SPECIAL NEEDS, OR FEARS THAT WE SHOULD KNOW

ABOUT? YES / NO (Circle One) IF SO, DESCRIBE: _____

IF CHOSEN TO BE A PARTICIPANT WITH "PROJECT FIT KID," IS THERE ANY PERSON OR PART OF

YOUR LIFE THAT YOU WOULD PREFER NOT TO SHARE ON CAMERA? (I.E. – SOCIAL

ORGANIZATIONS, ACTIVITIES, PERSONAL HISTORY, FRIENDS, FAMILY, ETC.) YES / NO (Circle One)

EXPLAIN: _____

WHO IS THE ONE PERSON WE COULD CALL AS YOUR CHARACTER WITNESS OUTSIDE OF YOUR FAMILY?

NAME & PHONE #(S): _____

PART II: ELIGIBILITY REQUIREMENTS

- 1) Applicant must be between 13 and 18 years of age.
- 2) Applicant must be a legal U.S. resident.
- 3) If selected as a participant Applicant and Applicant's parent(s)/legal guardian(s) must execute waivers and release agreements required by Project Fit Kid and Tri-D Fitness, LLC.

4) Applicant will need to be available to begin the program June 18th_____, 2012. The program is 12 weeks long. Applicant will need to be available to attend sessions 3 times per week. Sessions last from 2:30-3:30pm.

5) Any submission to become a participant is conditioned upon Applicant's physical ability to exercise, and certification of a medical professional that Applicant meets all physical and psychological requirements.

6) Applicant hereby gives the following representations, warranties, acknowledgements, consents and releases:

(a) By signing below, Applicant and Applicant's parent(s)/legal guardian(s) (collectively "Applicants"), hereby represent, warrant, acknowledge, and agree that Applicants: (i) have read and agree to be bound by the eligibility requirements; (ii) have completed this application honestly and accurately; (iii) acknowledge that if any of the information in this application is found to be false or incomplete, it will be grounds for dismissal from the Program selection process—even if Applicant meets the eligibility requirements,

(b) Project Fit Kid has no obligation to interview Applicant, and/or select Applicant as a participant; (v) even if Applicant is selected as a contestant,

(c) all decisions by Project Fit Kid concerning selection of the participants are final and not subject to challenge or appeal; and (vii) Project Fit Kid has no obligation to return any materials submitted by Applicants as part of the application whether or not Applicant is selected as a contestant.

(d) By submitting this application, Applicants hereby consent to the recording, use and reuse by Project Fit Kid and Tri-D Fitness, LLC and any of their respective licensees, successors, assignees, parents, subsidiaries, or affiliated entities, and each of their respective employees, agents, representative, officers and directors (collectively "Releasees") of Applicant's voice, actions, likeness, name, appearance, biographical material, and any information contained in, derived from or obtained in connection with Applicant's application to be a participant in the Program or in any materials submitted by Applicants in connection with Applicants' application (collectively "Likeness"), as edited, altered, or modified by the Producer or by any of the other Releasees, in any and all media now known or hereafter devised, worldwide in perpetuity, in or in connection with the Program or any other work. Applicants agree that

the Releasees or any of them may use all or any part of Applicant's Likeness, and may alter or modify it regardless of whether or not Applicant is recognizable. Applicants further agree that the Releasees exclusively own all right, title, and interest (including, without limitation, all copyrights) in and to any and all recordings made by them and in and to any and all video that Applicants have provided in connection with Applicants application and any other materials that I have provided or may provide in connection with my application or the Program (collectively, the "Materials"), including, without limitation, the right to edit, alter or modify the Materials and to use all or part of the Materials and my Likeness in any and all media now known or hereafter devised worldwide, in perpetuity. Applicants further agree that Releasees may use Applicant's Likeness and the Materials in connection with any promotion, publicity, marketing or advertisement for the Program. Applicants warrant that the Materials are original to Applicants and that no one else has any right to them. Moreover, Applicants acknowledge that other persons, including employees of the aforementioned entities, may have submitted to Producer, NBCU and/or any of the other Releasees and/or made public and/or may in the future originate and submit and/or make public, similar or identical material to the Materials, and Applicants understand that Applicants will not be entitled to compensation because of the use of other similar or identical material by any of the foregoing entities, or of their respective agents, employees, or representatives. Without in any way limiting the foregoing, if Applicant performs or includes any music (other than music supplied to Applicant by Producer) in connection with Applicant's application or the Program, Applicants represent and warrant that Applicants own all rights to such music, and Applicants grant Producer the right to record, reproduce and publicly perform any such music in and in connection with the Program or any other work. Without in any way limiting the waivers and releases set forth herein, Applicants waive any claims to royalties of any kind, whether accruing now or in the future, from Producer and Project Fit Kid for the use of any such music, including, without limitation, any applicable copyright, public performance, mechanical and synchronization royalties. Applicants grant the rights hereunder whether or not Applicant is selected to participate in the Program in any manner whatsoever. Applicants understand that Applicant will not be paid any money for giving Releasees these rights or for signing this agreement.

(e) Applicants hereby authorize Producer and any person or entity designated by Producer to investigate, access and collect information about Applicant, about any of the statements made by Applicants in Applicants' application, this Agreement, any supporting documents and any other documents that Applicants have signed or provided or do sign or provide in connection with Applicant's application to be selected as a contestant in the Program, or any other written or oral statements Applicant make in connection therewith. Applicants irrevocably authorize Producer and any person or entity designated by Producer to secure information about Applicant and Applicant's experiences from Applicant's current and former employers, associates, friends, family members, educational institutions, government agencies, credit reporting agencies, and any references Applicants have provided, and Applicants irrevocably authorize such parties to provide information concerning Applicant. Applicants hereby unconditionally and irrevocably release and forever discharge Producer, Project Fit Kid, the persons or entities designated by Producer, and all such parties and persons from any and all liabilities arising out of or in connection with any such investigation. Applicants specifically authorize investigation of Applicant's medical records. Applicants acknowledge and agree that any such information obtained

by Producer or by any person or entity designated by Producer pursuant to this paragraph or otherwise may be used for purposes of selecting contestants in the Program, and may be described or otherwise related in and in connection with the Program.

(f) RELEASE AND AGREEMENT NOT TO SUE. Applicants release Releasees from any and all liability arising out of the recording or use of Applicant's Likeness and/or the Materials. Applicants agree not to make any claim against Releasees as a result of the recording or use of Applicant's Likeness and/or the Materials (including, without limitation, any claim that such use defames Applicant or invades any right of privacy and/or publicity).

(g) As used herein, "Producer" shall include Project Fit Kid, its licensees, successors, and assigns, and each of their respective officers, directors, shareholders, employees, agents, and representatives. Applicants agree that Producer may license, assign, and otherwise transfer this application and all rights granted by Applicant under this application to any person or entity.

Applicant and/or Applicants have read, understand, and agree with the foregoing.

Applicant's Signature _____ Date: _____

Applicant's Name (Please Print) _____

Birthdate: _____ Age: _____

Required if Applicant is under the age of 18:

Parent(s)/Legal Guardian's Signature(s) _____ Date: _____

_____ Date: _____

Parent(s)/Legal Guardian's Name(s) (Please Print) _____
