

INFORMED CONSENT, RELEASE, AND WAIVER OF LIABILITY AND INDEMNITY

I, [], undersigne	ed below, (a "Client"), hereby acknowledge and agree that	t my
those described below, and	I assume full responsibility for such risk	s. In conside	lio"), involves risks of injury to persons and property, include eration of being permitted to enter any facility of Studio for ipment or participation in any way, I agree to the following:	_
associated with engaging in equipment for any purpose, in physical exercise or not. T any purpose, or using any negligence of the Studio, what rainers. This assumption of other areas, locker rooms, sor any equipment. I assum weightlifting, walking, joggin recreational endeavor. I agree	any physical exercise or activity, includi I do so at my own risk and assume the rish is assumption of risk includes injury or dequipment, whether provided to me by nether active or passive, or any of Studie risk includes, but is not limited to use of idewalks, parking lots, stairs, pools, whine the risk of my participation in any ag, running, aerobic activities, aquatic acted that I am voluntarily participating in the hat might result, including, without limital	ing personal sk of any and damage sustante Studio o's affiliates, any exercise ripools, saur activity, classetivities, tenre aforementi	is completely voluntary. I agree that there is an inherent training, entering Studio premises, or using the facility or d all injury and/or damage I may suffer, whether while engage ained while and/or resulting from using any Studio premises or otherwise, including injuries or damages arising out of employees, agents, representatives, successors, assigns e equipment (mechanical or otherwise), sports fields, courts has, steam rooms, lobby or other general areas of any facilities, program, instruction, or event, including but not limited his, basketball, volleyball, racquetball, or any other sporting oned activities and assume all risk of injury, illness, damages or theft of any personal property, whether arising out of	any ging s for f the and s, or ities, d to g or e, or
obtain a physical examination arising from my or others' unsupervised activities or proheat stress, sprains, broken facilities or on the premises vissues or medications relevancease exercise and report propersent (a) that I am in goinjury or impairment of healt of my health, and (c) any remy responsibility and Studio that during the performance my muscular and bodily read	on from a doctor before participating in an use of exercise equipment and mach ograms at a Studio; injuries and medical obones, and torn muscles and ligaments where the Studio is located. I understand ant to my participation in any exercise promptly any unusual feelings (chest discoved physical condition and have no disabine, (b) that I have consulted a physician advises that I consult a physician prior of my personal fitness training program	ny exercise a nines; injurie disorders ari s, among oth that it is my rogram, (b) i mfort, nause ility, illness, o concerning a ding the use to undergoil physical tou	and subject to risk of serious injury, and that Studio urges mactivity. Such risk of injury includes, but is not limited to: injues arising from my or others' participation in supervised ising from exercising at a Studio such as heart attacks, strol hers; and accidental injuries occurring anywhere in the Sturesponsibility to (a) disclose any existing and report new he inform trainer about activities I do not feel comfortable with ea, difficulty breathing, pain) during the exercise or afterward or other condition that could prevent me from exercising with an exercise program that will not risk injury to me or impairm a of food supplements and weight reduction products is enting any dietary or food supplement changes. I also understuching and positioning of my body may be necessary to asset I am using proper technique and body alignment. I expre	uries d or kes, udio ealth ds. I hout nen tirely tand sess
Client Ini	itial acknowledging he/she is physically	able to part	ticipate in Studio activities:	
liability to me and my persor therefore, on account of ar negligence of Studio or othe facilities, services or equipm	nal representatives, assigns, heirs and ne ny injury to me or my property, includir erwise, to the fullest extent permitted b nent. I also hereby agree to indemnify S	ext of kin for a ng injury lea by law, while Studio from a	its directors, officers, employees, and agents harmless from any loss or damage, and forever give up any claim or demanding to my death, whether caused by the active or pase I am in, upon, or about Studio premises or using any Studio studio studio may incur due to the any facilities or equipment of Studio whether caused by	ands sive udic my
broad and inclusive as perm shall, notwithstanding, contir recreational and/or fitness sp to the public, and the use of	nitted by the law in the State of Californinue in full legal force and effect. I acknow pectrum. Studio is not in the business of such items is incidental to the service pro	a and that if ledge that Selling weig ovided by St	sumption of risk and indemnity agreement is intended to be fany portion thereof is held invalid, it is agreed that the bala tudio offers a service to his/her clients encompassing the enthitifting equipment, exercise equipment, or other such produdio. I acknowledge and agree that Studio does not place strelease of claims of gross negligence or intentional acts.	ance ntire
of risk and indemnity agre legal action or assert a cl training from Studio. I ha	ement. I am aware and agree that by laim against Studio for Studio's negl	executing t ligence, or waiver and	derstand that it is a release of liability, express assumpthis waiver and release, I am giving up your right to bring for any defective product used while receiving persod release and further agree that no oral representation been made.	ng a onal
Client Signature]	Date [_]
Witness Signature]	Witness Name []