

Agreement of Release & Waiver of Liability Form

I, _____, hereby agree to the following:
(Print Your Name)

1. I am participating in an exercise class/program, taught by Design Fitness, LLC. I recognize that this class may require some physical exertion, which may be strenuous and may cause minor or serious physical injury, and I am fully aware of the risks and hazards involved.
2. I understand it is my responsibility to consult with a physician prior to my participation in any personal training and/or workout/class.
3. I agree to assume full responsibility for any risks, injuries, or damages which might occur as a result of participating in personal training and/or workout classes. I also adhere to the Policy Sheet enforced by Design Fitness.
4. I knowingly, voluntarily and expressly waive any claim I may have against Design Fitness and all personal trainers for any injury or damages that I may sustain as a result of participating in the class.
5. I, my Heirs or legal representatives, forever release, waive, discharge and covenant negligence or other acts.
6. I voluntarily agree to the terms and conditions stated above.

Please list and explain any health/physical conditions that you may have:

No relevant health/physical conditions to report

Your Signature

Date

Parent or Guardian Signature

Date



Policy Sheet

- Children are not allowed on the gym floor or use any exercise equipment at any time.

Initial: _____

- Notice of **24-hours is required** to cancel/reschedule a session/class or the session/class will be deducted from the client's package (or charged to the client's account if no package exists)

Initial: _____

- Cardio equipment may be used if client wants to come in early or stay after schedule training time without one-on-one supervision from trainer. Gym membership and Annual Maintenance Fees apply for open gym access.

Initial: _____

- Personal Training session, Group Class Packages, Gym Memberships are non-refundable and must be used within 6 months of purchase date. Sessions/Packages/Memberships can be transferred to a family member or friend.

Initial: _____

Your Signature

Date

Parent or Guardian Signature

Date

