



**EXCELLENCE
IN FITNESS**

Informed Consent and Waiver

Participant's Name (please print) _____

I do hereby consent to participate in a personal training program and consultation that will consist of physical fitness training for cardiovascular endurance, muscular strength and flexibility, as well as guidance with regard to dietary habits and stress management.

I have been informed and understand that physical exercise has been associated with certain risks, including but not limited to musculoskeletal injury, spinal injuries, abnormal blood pressure responses, and, in rare instances, heart attack or death.

Any information that is obtained regarding my fitness level and my progress will be treated as privileged and confidential and will not be released or revealed to any person other than my physician, personal trainer(s) or the program's fitness consultant (for record keeping purposes) without my expressed written consent.

I have read and understand the foregoing consent to participation in said program. I am aware that I may discontinue participation in the program at any time that I see fit to do so. If at any time I have questions concerning the content, policies, or procedures regarding the personal training program and/or consultation I will discuss these questions with my trainer or the program consultant immediately.

I voluntarily assume responsibility and exposure to all risk of injury and all risk of damage to or loss of property arising out of my participation in this program and/or use of any equipment and weights in the program, whether defective or not. I release, discharge, and waive any and all responsibility of Excellence In Fitness (EIF) and ProFitness, Inc. from and against any liability of injury, including death, and for damage to or loss of property which may be suffered by the undersigned arising out of, or in any way connected with the participation in this program and/or use of any equipment and weights in the program, whether defective or not as well as for designing, implementing, consulting, and evaluation of an individualized conditioning program for me. I indemnify and hold harmless EIF, ProFitness, Inc., its officers, agents, directors and employees, whether acting within the scope of their employment or otherwise, on behalf of myself, my heirs, executors, assigns, administrators and personal representatives from and against all liability, claims, demands, actions, loss, and damage arising out of my participation in said personal training program and consultation and/or use of any equipment and weights in the program, whether defective or not.

Participant's Signature _____ **Date** _____

***Parent/Legal Guardian Signature (*Minor)** _____ **Date** _____