

Waiver and Release Form

Group Exercise / Personal Training / Exercise Physiology Sessions

1. I understand there are inherent risks and hazards involved in participating in physical activity.
2. I attest that I am in sound physical condition.
3. I agree that in consideration of being permitted to use the fitness equipment:
 - (a) I release and hold harmless Karen Evans & Health Smart; including its principal, employees and agents from all liability arising out of personal injury, death or property loss which I may suffer arising out of or connected with my use of, participation and attendance of group, personal training sessions & or Health Coaching sessions.
 - (b) I do hereby waive as against Karen Evans & Health Smart: all claims or causes of action of any kind whatsoever in respect of personal injury, death or property loss which I may suffer arising out of or connected with my use of, participation and attendance of group, personal training sessions & or Health Coaching sessions.
4. This waiver and release is given notwithstanding that such personal injury, death or loss may have been caused solely or partly by the negligence of Karen Evans & Health Smart; its principal, employees and agents.

Client Signature

Client Signature: _____ X Date: ____ / ____ / ____

Client Name: _____