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| **Release of Liability Form** | |
| **Agreement and Release of Liability** | |
| **Client Name:** |  |
| **Address:** |  |
| **Phone Number:** |  |
| **DOB:** |  |
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| In consideration of being allowed to participate in the activities and programs of FitDen Integrated Wellness and to use its facilities, equipment and machinery in addition to the payment of any fee or charge, I do hereby waive, release and forever discharge and its directors, officers, agents, employees, representatives, successors and assigns, administrators, executors, and all others from any and all responsibilities or liability from injuries or damages resulting from my participation in any activities or my use of equipment or machinery in the above mentioned activities.  I do also hereby release all of those mentioned and any others acting upon their behalf from any responsibility or liability for any injury or damage to myself, including those caused by the negligent act or omission of any of those mentioned or others acting on their behalf or any way arising out of or connected with my participation in any activities of Fitness Training or the use of any equipment at FitDen Integrated Wellness located in Deerfield, Illinois. | |
| 2.  I understand and am aware that strength, flexibility and aerobic exercise, including the use of equipment is a potentially hazardous activity. I also understand that fitness activities involve the risk of injury and even death, and that I am voluntarily participating in these activities and using equipment and machinery with knowledge of the dangers involved. I understand this program does not provide any form of medical treatment, nor are it’s professionals, licensed medical practitioners. I hereby agree to expressly assume and accept any and all risks of injury or death. | |
| **Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |