

PHYSICAL ACTIVITY RELEASE OF LIABILITY

In Consideration of participating in “the activity” of pilates and fitness classes organized by Pilates Plus Fitness, Inc., the undersigned, on behalf of myself and my heirs, executors, administrators and assigns, hereby:

1. Release and forever discharge Pilates Plus Fitness and its employees, officers, directors, shareholders, affiliates, agents, representative, successors and assigns (collectively the “Releasees”) of and from all claims, demands, damages, costs, expenses, actions and causes of action (collectively the “Claim”) in respect of death, injury, loss or damage to myself or property howsoever caused, arising or to arise by reason of or during my participation and/or involvement in “the activity”, and notwithstanding that any Claim may have been contributed to or occasioned by the negligence of any of the Releasees.
2. Indemnify and save harmless the Releasees from and against any and all liability incurred by any or all of them arising as a result of or in any way connected to my participation in “the activity.”
3. Understands and acknowledges that the Releasees do not carry or maintain health, medical or disability insurance coverage for the undersigned and therefore agrees to assume responsibility for such insurance coverage on the undersigned.
4. Agrees that in the event that any provision of this Release and Indemnity is held to be invalid or unenforceable by any court of competent jurisdiction, the invalidity or unenforceability of such provision will not affect the remaining provisions of this Release and Indemnity which shall continue to be enforceable.

I HERREBY ACKNOWLEDGE READING, UNDERSTANDING AND AGREEING WITH THE FOREGOING.

Date	Signature of Participant
_____	_____
Name of emergency contact	Name of Participant
_____	_____
Relationship of contact	Address of Participant
_____	_____
Telephone of contact	Telephone of Participant
_____	_____