

Personal and Group Training Waiver Assumption of Risk and Photo Release

I, _____ in consideration of being permitted to participate in physical activity at Studio D, LLC and to use studio and gym equipment, on behalf of myself, my family, my heirs, and my assigns, I hereby release Studio D, LLC from any and all liability for injury, death, negligence or negligence of a third party, from property loss or damage suffered by me as a result of my participation in any and all programs at Studio D, LLC.

I, _____ acknowledge that I know, understand, and appreciate the inherent risks of participating in any and all associated fitness programs with Studio D, LLC. I know that risks may include, but are not limited to minor scrapes, strains, and bruises, as well as significant injuries such as broken bones, eye injury or loss, concussions, paralysis or even death. By execution of this agreement, I fully assume the inherent risks associated with any and all fitness exercise programs with Studio D, LLC. And I assert and am voluntarily participating in such activities. I fully understand that by signing below, that my personal information will be shared with Studio D, LLC for the purpose of training services only. I have read this release of liability, fully understand it, freely and voluntarily sign the same, and I am acting for myself, my heirs, personal representatives and assigns. As a client of Studio D, LLC I, _____ give permission for use of photographs taken of me during training sessions.

I, _____ do not authorize Studio D, LLC permission to take any photographs of me during any training sessions.

Signature: _____ Date: _____

Address: _____

Email: _____

Studio D, LLC