

VISIONS| OF |FITNESS

WOW CAMP EXERCISE POLICY

At Visions of Fitness, we are committed to the safety and welfare of all of our Campers and as such, it is our desire that your experience with our CAMP is an enjoyable one that is injury free. To this end, in order to participate in WOW CAMP, this WOW CAMP exercise policy must be initialed and signed.

1. In consideration of participating in WOW CAMP provided by Visions of Fitness LLC, I do hereby attest that I have FULLY disclosed ALL physical limitations, physical impairments, health challenges and preexisting conditions prior to participating in any of the services provided by Visions of Fitness including, but not limited to WOW CAMP. (Please Initial: __)
2. I have been informed of, understand and am aware that WOW CAMP Coaches are fitness professionals that have been trained in the area of demonstrating and executing proper and safe exercise techniques and as such, in order for me to participate in WOW CAMP, I must strictly adhere to their exercise instructions including, but not limited to exercise modifications; especially those that serve the purpose of keeping me injury free. (Please Initial: __)
3. Furthermore, I understand and acknowledge that if I am not in total compliance with the exercise and safety instructions provided by WOW CAMP Coaches, that I am subject to the immediate exclusion from WOW CAMP. (Please Initial: __)
4. Moreover, in the event that I am excluded from WOW CAMP based on this "WOW CAMP Exercise policy", I understand and acknowledge that I will receive a total refund of the remaining WOW CAMP sessions for which I have pre-paid. (Please Initial: __)
5. I hereby acknowledge that I have reviewed and agree to the above conditions. Any questions that I had concerning these conditions have been addressed and answered to my satisfaction. (Please Initial: __)

Signature

Date

Print Name

Date