

Waiver - Personal Training Sessions

Deborah Popoff
778 828 6675
d.popoff@shaw.ca



Personal Trainer: Deborah Popoff

Client: _____

Please Read and Sign Below

LIMITATIONS OF EXERCISE, IF ANY:

The Client hereby stipulates that the Client is physically sound. If there is any doubt regarding this, the Client should consult a doctor and the Client will disclose any and all physical and health issues to Deborah Popoff.

RELEASE OF LIABILITY:

It is further expressly agreed that all strength training, cardiovascular exercise, or any other exercise shall be undertaken by the Client at the Client's sole risk, and that the Personal Trainer is not liable to the Client, or to any other person or entity, for claims, demands, injuries, damages, actions or causes of action, whatsoever, that are related to the Training Sessions or any other service or advice provided by the Personal Trainer.

For absence of doubt, the Client expressly and forever releases and discharges the Personal Trainer from all such claims, demands, injuries, damages, actions or causes of action, from all acts of active or passive negligence on the part of the Personal Trainer.

The Client further acknowledges that he or she has read this waiver fully, and understands its contents.

X _____

Date: _____