



www.the7proj.com

To whom it may be concerned,

On behalf of The Seven Project Adaptive Fitness facility, we request a doctor's release for (client) _____ to undergo personal training by an adaptive fitness instructor. We also request that you list any contraindications regarding physical exercise and/or standing.

Here at The Seven Project, we aim to enhance the quality-of-life and wellness of those living with physical disability.

Best regards,

Tara Blackwell, CEO
(850) 972-9555
1308 West Nine Mile Road

Doctor's name _____ Signature _____

Phone _____ Email _____

Practice _____

- Released
- Not Released

Contraindications _____