

## Good Vibes Only Fitness, LLC Waiver

### Release of Liability

#### Participant Information

Full Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Emergency Contact Name & Phone: \_\_\_\_\_

---

#### Release of Liability

##### 1. Assumption of Risk and Release

In consideration of participation in the fitness activities, classes, parties, and programs of Good Vibes Only Fitness, LLC, including the use of its facilities, equipment, and services—whether paid, free, or as a guest—I, the undersigned, do hereby forever waive, release, and discharge Good Vibes Only Fitness, LLC and its officers, agents, employees, instructors, representatives, executors, and all others acting on its behalf, from any and all claims or liabilities for injuries or damages to my person, my minor children, or my property. This includes claims caused by the negligent act or omission of any of those mentioned or others acting on their behalf.

##### 2. Acknowledgment of Risk

I understand that fitness activities—including the use of any equipment—present inherent risks and may result in injury, serious disability, or death. I acknowledge that I am voluntarily participating in (and/or allowing my minor child to participate in) these activities with full awareness of the risks involved, including those related to online/virtual training.

##### 3. Health Declaration

I certify that I (and/or my minor child) am physically capable of participating in fitness activities and do not have any medical conditions that would limit safe participation. I understand the importance of consulting a physician before beginning any exercise program. I either have received such medical clearance or have chosen to participate (or allow my child to participate) without it and assume full responsibility for any consequences.

##### 4. Media Release

I grant Good Vibes Only Fitness, LLC the right to use photographs or video recordings of me (and/or my child) taken during classes or events for marketing and promotional purposes.

---

#### Participant Signature

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Date: \_\_\_\_\_

---

#### Parent/Guardian Consent (if participant is under 18)

I, the undersigned, am the parent/legal guardian of the minor participant named above. I have read and agree to the terms of this Release of Liability on behalf of my child.

Minor's Name: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Date: \_\_\_\_\_