**TRAINER’S RELEASE OF LIABILITY**

1. **THE PARTIES**. This Informed Consent and Assumption of Risk and Release of Liability (“Release”) is made on the Effective Date of this Agreement and entered between:

Client: [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_] with a mailing address of [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_] (“Client”) and

 Trainer: [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_] with a mailing address of [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_] (“Trainer”).

1. **GYM**. The Trainer is: (check one)

[ ]  - **Affiliated** with a gym under the name of [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_] (“Gym”). This Release will also cover and indemnify the Gym.

[ ]  - **Not Affiliated** with any other entity and is acting on their own behalf.

1. **INFORMED CONSENT**. The Client acknowledges, certifies, and accepts the following: (initial where applicable)

\_\_\_\_\_\_ - **Physical Condition**. That they are of adequate physical condition to participate in exercise despite any current medical conditions they may possess.

\_\_\_\_\_\_ - **Assumption of Risk**. That they assume the risk of physical injury from any advice, instruction, or action conducted during or as a result of a Session with the Trainer.

\_\_\_\_\_\_ - **Reporting Discomfort**. That any discomfort, distress, or uncomfortable feelings will be immediately brought to the attention of the Trainer.

\_\_\_\_\_\_ - **Indemnification**. That they will NOT hold the Trainer or its employer, affiliates, agents, or any other entity or individual connected to them, either directly or indirectly, liable for any result from the Sessions.

\_\_\_\_\_\_ - **Responsibility**. That they, the Client, assume all responsibility for a Client’s participation in the Sessions.

**Client Signature**: [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_](https://esign.com/) Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Personal Trainer Signature**: [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_](https://esign.com/) Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_