

Risk and Liability Waiver

Please Fill Out and Read Carefully. This Document Explains Your Risks.

Fitness United, LLC. and associates, located at 9811 Singleton Drive, Bethesda, MD 20817, are referred to as "the Trainer" below.

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- I am voluntarily participating in personal training and I am participating entirely at my own risk.
 - I am medically cleared to participate in personal training by my physician/Medical Professional and I have made the Trainer aware of any medical history that may impede or otherwise cause harm during personal training.
 - I understand that personal training can push a person to their limits physically and mentally and carry with it the risk of serious injury or even death.
 - The Trainer is not responsible for lost, stolen, or damaged personal property.
 - I acknowledge that the Trainer and associates are not health care professionals; if I need medical attention I will seek help from my primary care provider, physician, or qualified professional.
 - I understand that results from personal training can vary from individual to individual.
 - I agree to pay for my personal training sessions by the end of each week, Sunday.
 - In the event that any damage to the Trainer occurs as a result of my actions, willful or neglect, I acknowledge and agree to be held liable for any and all costs associated with those actions.
 - I agree to voluntarily give up and waive any right to bring legal action against the Trainer for personal injury or property damage.

I have read and understand the risks and responsibility

Print Name: _____

Sign Name: _____

Date: _____

Print Name Parent/Guardian (If under the age of 18):

Sign Name Parent/Guardian (If under the age of 18):

Date: _____