

Client Agreement



Client Information:

Name: _____
Address: _____
Phone: _____
Email: _____

Trainer Information:

Name: _____
Company: Kimberly Paul Coaching

Agreement:

1. **Responsibility for Health:** The Client acknowledges that their overall health and well-being are their own responsibility. The Client agrees to communicate any health concerns or limitations to the Trainer and to seek medical advice as needed.
2. **Liability Release:** The Client agrees to release Kimberly Paul Coaching, its trainers, coaches, and any online information provided from any liability for damages, injuries, personal loss, or any other claims arising from participation in the training and nutrition program.
3. **Acknowledgment of Risks:** The Client understands that exercise and nutrition programs involve inherent risks, including but not limited to injuries, and agrees to assume all responsibility for those risks.
4. **Voluntary Participation:** The Client voluntarily agrees to participate in the training and nutrition program and acknowledges that they have the right to withdraw at any time.
5. **Medical Clearance:** The Client warrants that they have either had a physical examination and received clearance from a physician or have chosen to participate without such clearance.
6. **Communication:** The Client agrees to communicate any changes in their health status, medications, or any other factors that may affect their participation in the program.

Signature:

Client: _____
Date: _____

Trainer: _____
Date: _____