Waiver, Release, and Assumption of Risk Form - Online Training

I,	, have volunteered to participate in a fitness program
provided to me by	("Trainer"), which may include, but may not be limited to,
resistance training and aerobio	c or cardiovascular exercise. In consideration of Trainer's agreement to instruct
and train me, I do here now ar	nd forever release and discharge and hereby hold harmless Trainer and his
respective agents, heirs, assign	ns, contractors, and employees from any and all claims, demands, damages,
rights of action or causes of ac	ction, present or future, arising out of or connected with my participation in this
or any exercise program inclu	ding any injuries resulting there from.
THIS WAIVER AND RELEA	ASE OF LIABILITY INCLUDES, WITHOUT LIMITATION, INJURIES
WHICH MAY OCCUR AS A	RESULT OF (1) EQUIPMENT BELONGING TO TRAINER OR TO
MYSELF THAT MAY MAL	FUNCTION OR BREAK; (2) ANY SLIP, FALL, DROPPING OF
EQUIPMENT; (3) AND/OR	NEGLIGENT INSTRUCTION OR SUPERVISION.
I,	, have been informed of, understand and am aware that any
exercise program, whether or	not requiring the use of exercise equipment, is a potentially hazardous activity.
I also have been informed of,	understand and am aware that any exercise and/or fitness activities involve a
risk of injury, as well as abnor	rmal changes in blood pressure, fainting, and a remote risk of heart attack,
stroke, other serious disability	or death, and that I am voluntarily participating in these activities and using
equipment and machinery wit	h full knowledge, understanding and appreciation of the dangers involved. I
hereby agree to expressly assu	ume and accept any and all risks of injury, regardless of severity, or death.
I,	, understand that I am voluntarily participating in Trainer's Online
Training program, and that no	in-person physical assessment will be performed prior to the design of my
program, and that Trainer will	provide a fitness program based on the information that I provide. Any
information that I provide that	t lacks detail, completeness, clarity, candor, and/or misrepresents reality in any
way may result in a program	containing inappropriate elements. I understand that the quality of the
information that I provide is s	olely my responsibility, and that Trainer in no way shall be liable for any and
all consequences and outcome	es arising from the information provided.

I have been advised that an examination by a physician should be obtained by anyone prior to commencing a fitness and/or exercise program, or initiating a substantial change in the amount of regular physical activity

performed. If I,	, have chosen not to obtain a physician's consent prior to
	hereby agree that I am doing so solely at my own risk. In any
event, I acknowledge and agree that I assume	the risks associated with any and all fitness related activities
and/or exercises in which I participate.	
I ACKNOWLEDGE THAT I HAVE THORO	UGHLY READ THIS FORM IN ITS ENTIRETY AND
FULLY UNDERSTAND THAT IT IS A REL	EASE OF LIABILITY. BY SIGNING THIS DOCUMENT, I
AM WAIVING ANY RIGHT I OR MY SUC	CESSORS MIGHT HAVE TO BRING A LEGAL ACTION
OR ASSERT A CLAIM AGAINST TRAINE	R FOR YOUR NEGLIGENCE OR THAT OF YOUR
EMPLOYEES, AGENTS, OR CONTRACTO	RS.
-	nt that explains the risks you are assuming by cical that you have read and understand this document
	ny part of this document, it is your ultimate
responsibility to ask for clarification pri	
responsibility to ask for clarification pri	or to signing it.
Participant's signature	
	or to signing it.
Participant's signature	Date