

Waiver of Liability and Assumption of Risk

Wellness Zen

PLEASE READ CAREFULLY BEFORE SIGNING

This Waiver of Liability and Assumption of Risk Agreement is entered into by the client _____ (Your Full Name) in connection with the health, nutrition, and fitness programs provided by WELLNESS ZEN.

1. Voluntary Participation

I acknowledge that I have voluntarily enrolled in services that may include nutrition guidance, meal plans, exercise programming, wellness coaching, or a combination thereof.

2. Assumption of Risk

I understand that participation in diet and fitness programs carries inherent risks, including but not limited to:

- Muscle strain, injury, or physical stress can occur if not careful with movements.

- Adverse reactions to diet changes or supplements
- Pre-existing health conditions potentially affected by the program

I voluntarily assume all risks associated with my participation.

3. Not Medical Advice

I understand that:

- The services offered are not intended to diagnose, treat, cure, or prevent any disease.
- The Company and its team are medical doctors or licensed healthcare providers, but do not see you in person, and neither are they your primary care providers; and hence assume no responsibility for diagnosing conditions.
- I have been advised to consult with my physician before beginning any diet, supplement, or fitness plan.

4. Limitation of Liability

To the fullest extent permitted by law, I release and hold harmless *Wellness Zen*, its owners, agents, employees, contractors, and affiliates from any liability for injuries, damage, or other claims that may result from participation in any program, whether caused by negligence or otherwise.

5. Indemnification

I agree to indemnify and hold harmless [Your Business Name] against any claims, damages, costs, or liabilities arising from my participation in the program.

6. Media Release (please select one of the following)

☐ I consent to the use of my testimonial, transformation photos, or video footage for marketing purposes.

☐ I do **not** consent to the use of my likeness or results.

7. Binding Agreement

This Agreement is binding upon me, my heirs, executors, legal representatives, and assigns. I have read and understand this Waiver and agree to all its terms freely and voluntarily.

Client Full Name: _____

Signature: _____

Date: _____

Signature Company :

Yashvi Limbasiya (Founder, Wellness Zen)

