

Centsible Fitness & Wellness, LLC

INFORMED CONSENT FORM FOR PHYSICAL FITNESS/YOGA PROGRAM

Client Information: (please print or type)

Name: _____ Phone #: _____

Mailing Address: _____

Email Address: _____

Date of Birth: _____ Age: _____ Gender: _____

Name of Emergency Contact: _____ Phone #: _____

General Statement of Program Objectives and Procedures:

I _____ (**name of client**) understand that this physical fitness program includes exercise to build the cardiorespiratory system (heart and lungs), the musculoskeletal system (muscle endurance, strength, and flexibility), and to improve body composition (decrease body fat in those who need to lose fat, with an increase in weight of muscle and bone). Exercise may include aerobic activities (treadmill, walking, running, biking, circuit training, Tabata training, or any other heart conditioning activities), mobility and flexibility exercises (to improve range of motion), strength training (weight lifting and body weight exercises) to improve muscular strength and endurance.

Description of Potential Risks:

I _____ (**name of client**), understand that the reaction of the heart, lungs, and blood vessel system to exercises cannot always be predicted with accuracy. I know there is a risk of certain abnormal changes occurring during or following exercise which may include abnormalities of blood pressure or heart attacks. Use of weight lifting equipment and engaging in heavy body calisthenics may lead to musculoskeletal strains, pain and injury if adequate warm-up, gradual progression, and safety procedures are not followed. I understand and agree that the personal trainer shall not be liable from any damages arising from personal injuries sustained by me during my personal training program. I also understand that I will be using my own exercise equipment and will be responsible for the safety of my own equipment, and use said equipment at my own risk. I assume full responsibility for any injuries or damages which may occur during the training period.

Description of Potential Benefits:

I understand that a program of regular exercise for the heart, lungs, muscles and joints, may have benefits associated with it. These may include a decrease in body fat, improvement in blood fats and blood pressure, improvement in physiological function, and decrease in heart disease.

I covenant and represent that I have had a recent physical checkup and have my personal physician's permission to engage in aerobic and/or anaerobic conditioning.

For and in consideration of being allowed to receive personal fitness training from **Andrea Hodak, ACE Certified Personal Trainer**, and the mutual covenants contained in this Agreement, and other good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, the undersigned _____ (**name of client**) agrees to the above Training Program Policies and Descriptions and I do hereby agree to the following:

1. It is hereby agreed that I, _____ (**name of client**), do fully comprehend and assume all risks involved in participating in this Personal Training Program. I have been advised by **Andrea Hodak, ACE Certified Personal Trainer**, to consult my physician prior to my participation in said Program to ensure that I am physically able to engage in strenuous physical activity.
2. Being fully cognizant, and assuming all risks involved in the Personal Training Program offered by **Andrea Hodak, ACE Certified Personal Trainer**, I do hereby remise, release, quitclaim, and forever discharge **Andrea Hodak, ACE Certified Personal Trainer**, her employees or agents, administrators, successors and assigns, of and from any and all manner of actions, suits, debts, accounts, damages, judgments, executions, claims, or demands whatsoever in law or equity, or otherwise, against **Andrea Hodak, ACE Certified Personal Trainer**, her employees or agents, administrators, successors and assigns, which I, my heirs, executors, or administrators hereafter can, shall or may have, for, upon, or by reason of any injury that I may sustain or incur while participating in the Personal Training Program of **Andrea Hodak, ACE Certified Personal Trainer**, or while engaging in physical conditioning exercises.

3. In consideration of being allowed to participate in said Personal Training Program, I do hereby assume all risks of my involvement and do covenant and agree not to bring legal action for damages should I sustain any injury, and do further release **Andrea Hodak, ACE Certified Personal Trainer**, her employees or agents, administrators, successors and assigns from all acts of active or passive negligence on the part of **Andrea Hodak, ACE Certified Personal Trainer**, her employees or agents, administrators, successors and assigns.
4. I also agree to indemnify and hold release **Andrea Hodak, ACE Certified Personal Trainer**, her employees or agents, administrators, successors and assigns, harmless from any and all claims, actions, suits, procedures, costs, expenses, damages, and liabilities, including attorney's fees, brought as a result of my involvement in said Personal Training Program and to reimburse them for any such expense incurred.

Witness my signature this _____ (Date) _____

(Printed Name of Client)

(Signature of Client)