



**PERSONAL FITNESS TRAINING**

**AGREEMENT OF RELEASE AND WAIVER OF LIABILITY**

I, \_\_\_\_\_, hereby agree to the following:

1. That I am participating in the Health & Fitness Classes, Programs or Workshops offered by Metamorphocise during which I will receive information and instruction about health and fitness. I recognize that fitness programs require physical exertion which may be strenuous and may cause physical injury, and I am fully aware of the risks and hazards involved.
2. I understand that it is my responsibility to consult with a physician prior to and regarding my participation in the Health & Fitness Classes, Programs or Workshops. I represent and warrant that I am physically fit and I have no medical condition which would prevent my full participation in the Exercise Classes, Health Programs or Workshops.
3. In consideration of being permitted to participate in Health and Fitness Classes, Programs or Workshops, I agree to assume full responsibility for any risks, injuries or damages, known or unknown, which I might incur as a result of participating in the program.
4. In consideration of being permitted to participate in Health & Fitness Classes, Programs or Workshops, I knowingly, voluntarily and expressly waive any claim I may have against Metamorphocise for injury or damages that I may sustain as a result of participating in the program.
5. I, my heirs or legal representatives forever release, waive, discharge and convenient not to sue Metamorphocise for any injury or death caused by their negligence or other acts.

I have read the above release and waiver of liability and fully understand its contents. I voluntarily agree to the terms and conditions stated above.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Participant

If participant is under 18:

AS LEGAL GARDIAN OF \_\_\_\_\_, I CONSENT TO THE ABOVE TERMS AND CONDITIONS.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Participant

WITNESSED BY : \_\_\_\_\_