

Fitness Trainer Client Liability Waiver Form

Please read this document carefully. By signing this document, you are waiving certain legal rights, including the right to sue the fitness trainer and associated entities.

1. Client Information

Full Name:

Date of Birth (MM/DD/YYYY):

Phone Number:

Email Address:

Street Address:

2. Emergency Contact Information

Emergency Contact Name:

Relationship to Client:

Emergency Contact Phone:

3. Acknowledgment of Risk and Release of Liability

Assumption of Risk: I understand and am aware that strength, flexibility, and aerobic exercise, including the use of equipment, is a potentially hazardous activity. I also understand that fitness activities involve a risk of injury and even death, and that I am voluntarily participating in these activities and using equipment and machinery with knowledge of the dangers involved. I hereby agree to expressly assume and accept any and all risks of injury or death.

Health Status and Representation: I represent that I am in good physical condition and have no medical reason or impairment that might prevent me from participating in active or passive exercise. I acknowledge that the trainer has recommended that I consult a physician prior to starting this or any exercise program.

Release and Waiver: In consideration of being allowed to participate in the personal training services, I hereby waive, release, and forever discharge the personal trainer, their employees, agents, and representatives from any and all responsibilities or liability for injuries or damages resulting from my participation in any activities or my use of equipment in the above-mentioned activities.

4. Client Signature and Agreement

By signing below, I acknowledge that I have read and understood this Liability Waiver and Release in its entirety, and that I agree to all its terms.

Client Signature (Print Name):

Date Signed (MM/DD/YYYY):

5. Trainer Acknowledgment

Trainer Name:

Trainer Signature (Print Name):

Date Signed (MM/DD/YYYY):