

**PERSONAL TRAINING**

Release of Liability, Informed Consent and Agreement

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, do hereby consent to participate in Emily Breaker’s personal training program. I will notify Emily Breaker in advance if there are any known risks that would jeopardize my ability to participate in her program.

I have been informed and understand that physical exercise has been associated with certain risks, including but not limited to musculoskeletal injury, spinal injuries, abnormal blood pressure responses, and in rare instances, heart attack or death. Every effort will be made to minimize these risks. Any information that is obtained regarding my fitness level and my progress will be treated as privileged and confidential and will not be released or revealed to any person other than my physician.

I have read and understand the foregoing consent to participate in Emily Breaker’s personal training program. I am aware that I may discontinue participation in the program at any time that I see fit and to do so at my own expense. If at any time I have questions concerning the content, polices, or procedures regarding the fitness training program, I will discuss them with Emily Breaker immediately.

In addition, I agree to the following:

a. Payment for training sessions will be made in advance of meeting with Emily Breaker. Payments will not be refunded or prorated unless provided documented medical reasons. (Note: Payments can be made with cash, check, or Venmo and training will not begin until payment has been received in full.)

b. All fitness training sessions will expire 60 days from the date of purchase. Any sessions will be forfeited upon expiration unless I have provided documented medical reasons in advance for delaying usage.

c. Training sessions begin at the time scheduled. If I arrive late, that time will be deducted from the session. If I do not show up for an appointment without proper notice, I will be charged for that full session.

d. To cancel or reschedule an appointment, Emily Breaker must be contacted at least 24 hours in advance. If I do not comply, I will be charged for the session.

I release Emily Breaker and Rick Anderson Fitness from all claims of property loss, property damage, injury, accident, or death, which may be sustained while participating in any training sessions.

If medical attention is required, I give my permission for such medical care.

I agree to give Emily Breaker, Rick Anderson Fitness and Nicole J & Co marketing group permission to use photographs or videos of me in its promotional/educational materials.

I have read this form and understand the content.

Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_

(A parent or legal guardian MUST print and sign if the client is under the age of 18