**ASSUMPTION AND ACKNOWLEDGEMENT OF RISKS AND**

**RELEASE OF LIABILITY AGREEMENT**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (“**Client**”), in consideration of the services provided by **FamFit of Florida, LLC** and its President and sole Shareholder, Kelly Ann Corbin (collectively, “**Personal Trainer**”), including training sessions, strength training, flexibility development and/or aerobic exercise, hereby agree to the following:

1. **ACKNOWLEDGMENT OF RISKS**. Client acknowledges that participating in fitness training sessions and/or any involvement in any weight training programs can be a dangerous activity involving MANY RISKS OF INJURY, including but not limited to the potential for catastrophic injury, death, serious neck and spinal injuries which may result in complete or partial paralysis, serious injury to virtually all bones, joints, ligaments, muscles, tendons, and other aspects of the muscular-skeletal system, disorders in heartbeat, difficulty breathing, fatigue or dizziness, and serious injury or impairment to other aspects of my body, general health and well-being.

2. **EXPRESS ASSUMPTIONS OF RISK AND RESPONSIBILITY**. Client agrees to assume responsibility for all the risk of the fitness training sessions, whether identified above or not. My participation in such activity is purely voluntary. I assume full responsibility for myself for any bodily injury, accident, illness, paralysis, death, loss of personal property and expenses thereof as a result of my participation in the fitness training sessions.

3. **RELEASE**. Client hereby agrees to exonerate, hold harmless and release Personal Trainer, their respective agents and employees, from any and all claims, liability and causes of action of every kind arising from any and all physical or emotional injuries and/or damages (including death) which may happen to me, arising from or in connection with my participation in any activities related to personal or physical training with Personal Trainer, including but not limited to damages or losses or injuries arising out of or as a result of the negligence or negligent acts of Personal Trainer.

The terms hereof shall serve as release and assumption of risk for my heirs, estate, executor, administrator and assignees.

Client hereby acknowledges and agrees to signing this Agreement freely and willfully and not under fraud or duress. Client has both read and understood the terms of this Agreement, and hereby signs this Agreement knowing and understanding to be legally bound hereby and understanding this Agreement to be a complete release and waiver in favor of Personal Trainer.

**SIGNED:**

By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PERSONAL INFORMATION:**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DOB: \_\_\_/\_\_\_/\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Post Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (C) (W) (H)

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Contact Person: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_