



JENZONE FITNESS
AGREEMENT OF RELEASE AND WAIVER OF LIABILITY

Personal Information:

Name: _____

E-mail: _____ Phone #: _____

Emergency Contact: _____

Emergency Phone #: _____ Relationship: _____

Waiver of Liability:

I, _____, hereby agree to the following:

I am participating in the Group Fitness Classes offered by Jenzone Fitness during which I will receive information and instruction about fitness. I recognize that fitness programs require physical exertion that may be strenuous and may cause physical injury, and I am fully aware of the risks and hazards involved.

I understand that it is my responsibility to consult with a physician prior to and regarding my participation in the Group Fitness Classes. I represent and warrant that I am physically fit and I have no medical condition that would prevent my full participation in the Group Fitness Classes

In consideration of being permitted to participate in Group Fitness Classes 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 classes.

In consideration of being permitted to participate in Group Fitness Classes, I knowingly, voluntarily and expressly waive any claim I may have against Jenzone Fitness for injury or damages that I may sustain as a result of participating in the classes.

I, my heirs or legal representatives' forever release waive, discharge and covenant not to sue Jenzone Fitness 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.

Participants under 18 must have the consent of parent or guardian

Signature: _____ Date: _____

Witnessed by: _____ Date: _____