

Fitness Program Liability Waiver

This Liability Waiver ("**Waiver**") is executed by the undersigned participant ("**Participant**") in favor of [Fitness Program Name], its agents, employees, trainers, and volunteers.

Assumption of Risk

I acknowledge that participation in fitness programs, including but not limited to exercises, personal training, and use of equipment, carries inherent risks including injury, illness, or even death. I voluntarily assume all such risks, whether known or unknown, associated with my participation.

Release and Waiver

I, for myself, my heirs, executors, administrators, and assigns, hereby release and discharge [Fitness Program Name] and its representatives from any and all claims, liabilities, demands, actions, or causes of action resulting from any injury, loss, or damage sustained during or as a result of participation in the program.

Medical Clearance

I certify that I am physically fit, have sufficiently prepared for participation, and have not been advised otherwise by a qualified medical professional. I recognize my responsibility to obtain medical clearance prior to starting this program.

Emergency Authorization

In the event of injury or illness, I authorize the program staff to secure medical treatment as necessary. I agree to assume full financial responsibility for any resulting medical care.

Severability

I understand that if any portion of this Waiver is held invalid, the remaining provisions continue to be in full force and effect.

Participant Signature

Date

Printed Name:

Important Notes

- This document should be reviewed for compliance with local laws and updated as needed.

- Participants should read and understand all terms before signing.
- Medical clearance is highly recommended prior to engaging in any new fitness activity.
- This waiver does not cover acts of gross negligence or intentional misconduct by the program or its staff.
- Retain a copy of the signed waiver for your records.