



Diet by Design

**FITNESS/EXERCISE FACILITY WAIVER & RELEASE**

**All persons who desire to use Diet by Design’s Fitness/Exercise Facilities must complete this form.**

No one under the age of fourteen (14) may use the fitness/exercise facility or equipment at any time.

Refer to *your initial fitness assessment paperwork* for additional policies, regulations, and guidelines.

Use of fitness/exercise facilities and equipment are at the user’s sole risk and responsibility. All users are advised and encouraged to consult with his/her personal physician before beginning use of fitness or exercise facilities and/or equipment or participating in any physical activity.

*In consideration of being given the option to use the fitness/exercise facility and/or equipment, for myself and my family, heirs, executors, representatives, administrators, and assigns, I hereby waive, release, and forever discharge Diet by Design and its respective officers, directors, employees, agents, and affiliated organizations from and against any and all claims, liabilities, and causes of action, whether foreseeable or unforeseeable, which may at any time arise out of or relate in any manner, directly or indirectly, to my use of said fitness/exercise facility and/or equipment or participation in any services or programs related thereto. This waiver and release shall include, but not be limited to a release of all claims, liabilities, and causes of action which may arise at any time in connection with any personal or other injury to myself or others, or death caused by or related to my use of said Fitness/exercise facilities and/or equipment or participation in any services or programs related thereto.*

My signature hereby affirms that I have fully and completely read, understand, and agree to this waiver and release and all contents thereof.

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

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

Signature: \_\_\_\_\_

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

Parent/Guardian Signature: \_\_\_\_\_

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

Witness: \_\_\_\_\_

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