



Waiver and Release Form

I, _____, (Full Name) agree to participate in CoreFitness training programs with a certified fitness instructor. I recognize that exercise is not without varying degrees of risk to the musculoskeletal and/or cardio respiratory system. I hereby certify that I know of no medical problems that would increase my risk of illness and/or injury as a result of participation in an outdoor fitness program designed by CoreFitness.

I recognize that there are inherent risks in participating in an indoor and/or outdoors exercise program including, but not limited to; falls related to wet or uneven pavement and debris including glass and rocks in the exercise area.

I understand and have been informed that there exists the possibility of adverse reactions to exercising. I have been informed that these may include, but are not restricted to; abnormal blood pressure responses, fainting, disorders of heart rhythm, stroke, heart attack and in rare instances, death.

I agree to waive, release, remise and discharge CoreFitness and its employees of any and all claims, demands, actions or damages of any kind resulting from participation in CoreFitness Challenge. The undersigned hereby releases CoreFitness as well as waives any and all claims and understands and assumes any and all risk with participation in CoreFitness Challenge.

Signature

Date

Please print full name

CoreFitness has my permission to contact me by email.

My email address is: _____