

# Whole Body Fitness Exercise Class Waiver and Release of All Claims by Minor Participant

I, \_\_\_\_\_ hereby consent to have my son/ daughter:

\_\_\_\_\_ (CLASS PARTICIPANT) to voluntarily engage in an exercise class that includes, but is not limited to the following activities:

*Walking/jogging/running, going up & down stadium stairs, jump rope, lunging, balance work, calisthenics with medicine balls, barbell lifting, exercise band & tubing, stretching, and abdominal/core work.*

The levels of exercise that he/she will perform will be at their own pace, based upon their cardio respiratory (heart and lungs) fitness, muscular strength and endurance. I understand that there are risks that may be associated with any exercise program. I hereby state that I, or my child, will inform Whole Body Fitness, LLC of any symptoms during their participation in the exercise class that occurs such as fatigue, shortness of breath, chest discomfort, or any pain or discomfort, for their safety and benefit.

The CLASS PARTICIPANT will be given instructions on how to perform an exercise. If they do not understand how to do it, they will ask questions of a Whole Body Fitness, LLC staff person. Whole Body Fitness, LLC staff will provide leadership to direct their activities, monitor their performance, and otherwise evaluate their effort.

If the CLASS PARTICIPANT has high blood pressure, diabetes, a heart condition, or if they are taking any medications that will affect their performance in an exercise class, I will inform a Whole Body Fitness Staff person prior to them participating in this class.

**IMPORTANT NOTE:** Depending on son's/daughter's health status, if they are 50lbs overweight, if I have any of the above conditions, or other medical conditions that would put them at risk in an exercise program, we will need a medical release from their doctor prior to participation in the exercise class and they will be required to wear a Fitness Heart Rate Monitor. We can help you with locations for purchasing one.

I acknowledge that any type of exercise involves a risk of injury. Whole Body Fitness shall not be liable for any injuries or damage to the undersigned or my son/daughter, or the property of the undersigned or my son/daughter, subject to any claim, demand, injury or damages whatever, including, without limitation, those damages resulting from acts of active or passive negligence on the part of the CLASS PARTICIPANT.

It is agreed that Whole Body Fitness, LLC shall not be responsible or liable to the undersigned for articles lost or stolen in connection with Whole Body Fitness, LLC Exercise Class.

I acknowledge that I have read this document in its entirety and understand the above as it relates to my son or daughter.

\_\_\_\_\_  
Signature of Parent of CLASS PARTICIPANT

\_\_\_\_\_  
Date