

IRON+SALT

FITNESS

Waiver, Release of Liability, & Assumption of Risk Form

I, _____, have chosen to participate in a fitness program provided to me by Iron + Salt Fitness with Scott and/or Jackie Salsgiver. In consideration of Iron + Salt Fitness with Scott and/or Jackie Salsgiver instructing and training me, I hold Iron + Salt Fitness and/or Scott and/or Jackie Salsgiver unaccountable from any and all claims, demands, rights of action or causes of action, present or future, arising out of or connected with my training in this exercise program including any injuries resulting there from.

THIS WAIVER AND RELEASE OF LIABILITY INCLUDES, WITHOUT LIMITATION, INJURIES WHICH MAY OCCUR AS A RESULT OF: (1) EQUIPMENT BELONGING TO TRAINER OR TO MYSELF THAT MAY MALFUNCTION OR BREAK; (2) ANY SLIP, FALL, OR DROPPING OF EQUIPMENT; (3) NEGLIGENT INSTRUCTION OR SUPERVISION.

I, _____, have been informed of and understand that any exercise program is a potentially hazardous activity. I also have been informed of and understand that any exercise and/or fitness activities involve a risk of injury, as well as abnormal changes in blood pressure, fainting, and a remote risk of heart attack, stroke, and other serious disability or death. I am voluntarily participating in these activities and using equipment and machinery with full knowledge, understanding, and appreciation of the dangers involved. I hereby agree to expressly assume and accept any and all risks of injury, regardless of severity. I have been advised that an examination by a physician should be obtained by anyone prior to commencing a fitness and/or exercise program or initiating a substantial change in the amount of regular physical activity performed. If I, _____, have chosen not to obtain a physician's consent prior to beginning this fitness program with Iron + Salt Fitness with Scott and/or Jackie Salsgiver, I hereby agree that I am doing so solely at my own risk. In any event, I acknowledge and agree that I assume the risks associated with any and all fitness related activities and/or exercises in which I participate.

I ACKNOWLEDGE THAT I HAVE THOROUGHLY READ THIS FORM IN ITS ENTIRETY AND FULLY UNDERSTAND THAT IT IS A RELEASE OF LIABILITY. BY SIGNING THIS DOCUMENT, I AM WAIVING ANY RIGHT I OR MY SUCCESSORS MIGHT HAVE TO BRING A LEGAL ACTION OR ASSERT A CLAIM AGAINST IRON + SALT FITNESS OR AGAINST SCOTT AND/OR JACKIE SALSGIVER.

This form is an important legal document that explains the risks you are assuming by beginning an exercise program. It is critical that you have read and understand this document completely. If you do not understand any part of this document, it is your ultimate responsibility to ask for clarifications prior to signing it.

I UNDERSTAND THAT I WILL BE CHARGED MY FULL SESSION RATE FOR ANY CANCELATIONS UNDER 24 HOURS

Please print name	Participants signature	Date
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Parent or legal guardian (if participant is under age 18)	Date
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