



Beverly Hills Los Angeles Hollywood

L.A. Star Fitness

Your Personal Training Group

www.LAStarFitness.com

AGREEMENT OF RELEASE AND WAIVER OF LIABILITY

I, _____, give my consent to participate in the physical fitness evaluation program conducted by fitness trainer Vasile Voicu (hereinafter known as "Trainer") at Ultra Body Fitness Center. I hereby agree to the following:

1. I will participate in a regular program of health and fitness classes, programs, workshop or specific training offered by Trainer and his associates during which I will receive information and instruction about health and fitness. I recognize that exercise carries some risks to the musculoskeletal system (e.g. sprains, strains) and the cardiorespiratory system (e.g. dizziness, discomfort in breathing, heart attack).
2. I understand that it is my responsibility to consult with a physician prior to my participation in health and fitness classes, programs, workshop, or specific training. I represent and warrant that I am physically fit and I have no medical condition that would prevent my full participation in the exercise classes, health programs, workshop, or specific training.
3. I understand that I will undergo initial testing to determine my current physical fitness status. The testing will consist of completing this health inventory, taking a step test, a bicycle ergometer test for cardiovascular fitness, muscular fitness and the body composition.
4. I further understand that such screening is intended to provide the Trainer with essential information used in the development of my fitness program. I understand that my results will be available only to me. I further understand that the testing is not intended to replace any other medical test or services of my physician. I will be provided with a copy of all test results. I may share these results with whomever I choose, including my personal physician.
5. In further consideration of participating in the health and fitness classes, programs, workshop and specific training, I knowingly, voluntarily and expressly waive any claim I may have against the Trainer and his associates for injury or damages that I may sustain as a result of participating in the programs.

I have read the above release and waiver of the liability and fully understand its content. I agree to the terms and conditions stated above.

Signature of PARTICIPANT

DATE

If participant is under the age of 18:

As legal guardian of _____, I consent to the above terms and conditions.

Signature of PARENT or GUARDIAN

DATE