

Liability Waiver

Please read carefully and complete this form. You may return your completed form to Janie Jennings in person or complete the digital version through your client account with MyBestStudio™.

Client

Name: _____

Address: _____

Email: _____

Phone Number (Home) _____ (Cell) _____

Contact Person in case of Emergency

Name: _____

Relationship to Client: _____

Address: _____

Phone Number (Home) _____ (Cell) _____

Release of Claims for Injuries

It is hereby agreed that I, _____, do fully comprehend and acknowledge the risk involved in the use of equipment known as the Pilates Reformer/Cadillac. I have been advised and do hereby acknowledge that use of said equipment requires that I participate in extensive physical conditioning exercises and do hereby acknowledge that I have been advised to consult a physician prior to my instruction and use of said equipment to ensure that I am physically able to engage in such physical activity.

In consideration of my being allowed to use said equipment, I hereby personally assume all risks in connection with this use and further release the owners, instructors, programs, agents, and operators for any injury or damage which may befall me. Including all risks connected therewith whether foreseen or unforeseen; and further to save and hold harmless the program and persons from any claim by me, or my family, estate, heirs or assigns, arising out of my use of said equipment and enrollment in this course.

I further state that I have read this release before signing it and that I am legal ages and legally competent to sign.

Client Name _____ Date _____