



Personally Fit
FITNESS & PHYSICAL THERAPY

WAIVER AND RELEASE OF LIABILITY

I fully understand and acknowledge that exercise and fitness activities involve risks, dangers and hazards, and that my participation in such activities and/or use of exercise and fitness equipment may result in injury or illness including but not limited to bodily injury, disease, strains, fractures, partial and/or total paralysis, death or other ailments. I acknowledge and understand that I am using the facilities, equipment and services of Personally Fit, Inc. (the "Facility") at my own risk. I, on behalf of myself, my heirs, and my personal representatives, agree that the Facility and its owners, officers, shareholders, employees, agents, contractors, volunteers and affiliates shall not be liable, and I hereby expressly waive any claim of liability, for personal or bodily injury or damages which occur to me or for any loss of or injury to person or property. This waiver includes, but is not limited to, any loss, damage or destruction of personal property, and is intended to be a complete release of any and all responsibility for personal injuries and/or property loss or damage sustained by me while on the premises of the Facility, whether using exercise and fitness equipment or not, and regardless of whether such personal injuries and/or property loss or damage is caused by me, by third parties, or by the Facility or its owners, officers, shareholders, employees, agents, contractors, volunteers or affiliates.

I, on behalf of myself, my heirs, and my personal representatives, hereby voluntarily agree to indemnify and hold the Facility and its owners, officers, shareholders, employees, agents, contractors, volunteers and affiliates harmless from and against any and all liability, claims, actions or damages incurred arising out of my use of the facility's equipment or services of the Facility.

I HAVE CAREFULLY READ THE ABOVE WAIVER AND RELEASE OF LIABILITY AND FULLY UNDERSTAND ITS CONTENTS. I SIGN THIS WAIVER AND RELEASE OF LIABILITY OF MY OWN FREE WILL. MY SIGNATURE ON THIS WAIVER AND RELEASE OF LIABILITY AS WELL AS MY USE OF THE FACILITIES, EQUIPMENT AND SERVICES OF PERSONALLY FIT, INC. ACKNOWLEDGES MY ACCEPTANCE OF ALL OF THE TERMS OF THIS WAIVER AND RELEASE OF LIABILITY.

Participant's Name: _____ **Date of Birth:** _____

Address: _____

Home Phone: _____

E-Mail : _____

Signature: _____ **Date:** _____

PERSONALLY FIT, INC

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