



# Health & Fitness Waiver

*Please read and sign this Health & Fitness Waiver before participating in any activity at Be. PILATES & FITNESS.*

I understand I will receive information and instruction while participating in the class, health program or workshop offered by Be. PILATES & FITNESS. I recognize that these will require physical exertion, which may be strenuous and may cause physical injury, and I am fully aware of the risks and hazards involved.

I understand that it is my responsibility to consult with a physician prior to and regarding my participation in this class or any other activity associated with Be. PILATES & FITNESS. I represent and warrant that I am physically fit and have no medical conditions that would prevent my full participation in the class, health program or workshop.

I agree to assume full responsibility for any risks, injuries or damages, known or unknown, which I may incur as a result of participating in the program.

I knowingly, voluntarily and expressly waive any claim that I may have against the Be. PILATES & FITNESS instructors or Be. PILATES & FITNESS and Be. ENTERPRISES LLC for injuries or damages that I may sustain as a result of my participation.

Heirs, my legal representatives and I forever release and waive any liabilities against Be. PILATES & FITNESS and its instructors for any injury or death incurred by my voluntary participation in this class, workshop or activity.

I HAVE READ THE ABOVE RELEASE AND WAIVER OF LIABILITY AND FULLY UNDERSTAND THE CONTENT. I VOLUNTARILY AGREE TO THE TERMS AND CONDITIONS STATED ABOVE.

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Full name (printed)

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Date

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Signature