



## Waiver Release

I, \_\_\_\_\_, understand that participation in exercise and/or recreational activities involves the possible risk of personal injury. The use of the equipment, facilities, and premises of Unified Strength or my facilities/home by persons participating in exercise and recreation activities shall constitute acceptance of that risk regardless of the nature of that injury.

Unified Strength, its officers, agents, employees, representatives, executors, and all others acting on their behalf, shall not be liable for any injury, loss or damage sustained or suffered by persons participating in exercise and recreation activities at Unified Strength or client facility including death, whether caused directly, or indirectly by the negligence or fault of Unified Strength, its officers, agents, employees, representatives, executors, and all others acting on their behalf. This waiver shall be binding upon all heirs and my personal representatives.

I understand that participation in an exercise and recreation program may cause sweating, elevated heart rate, elevated blood pressure, muscular discomfort during and/or afterward and assume wilfully these risks. I do hereby further declare myself to be physically sound and suffering from no condition, impairment, disease, infirmity or other illness that would preclude my participation in exercise and recreation activities offered by Unified Strength.

I confirm that I have read and understand all the terms set out in this document; that I am 18 years of age; and that I am aware that this waiver and release is binding upon my heirs and personal representatives.

**Participant**

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Date: \_\_\_\_\_

**Witness**

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Date: \_\_\_\_\_