



WAIVER AND INFORMED CONSENT

I am aware that health and fitness activities may range from vigorous cardiovascular activity (i.e. aerobic, bicycle, treadmill, stair climbing, etc.) to the strenuous exertions of strength training (i.e. free weights, bands, etc.). I understand that participating in these and other physical activities with Melanie Morrissette doing business as ABS-TRACT FITNESS (ABS-TRACT FITNESS) involves certain inherent risks, including but not limited to: death, serious neck and/spinal injuries resulting in complete or partial paralysis, heart attacks, injury and injury to bones, joints or muscles. My participation is voluntary with full knowledge of such inherent participatory dangers and I hereby agree to assume any and all inherent risks of property damage, personal injury or death.

In consideration of ABS-TRACT FITNESS agreeing to provide me with training and guidance on how to become more physically fit, my being permitted to participate in the activities arranged by ABS-TRACT FITNESS and for other good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, I, for myself, my heirs, next of kin, executors, administrators, and anyone else who may claim on my behalf, HEREBY WAIVE ANY AND ALL CLAIMS, for liability and damages or loss resulting in personal injury or loss of life, from or in connection with my participation in the physical activities as suggested by ABS-TRACT FITNESS howsoever caused.

I FURTHER HEREBY RELEASE AND FOREVER DISCHARGE ABS-TRACT FITNESS, its agents and representatives (collectively the Releasees) from and against all demands, claims, actions, damages, costs and expenses arising from or with respect to death, injury, damage or loss to my person of any kind whatsoever, howsoever caused in connection with my participation in ABS-TRACT FITNESS activities though the same may have contributed to or have been caused by the NEGLIGENCE, GROSS NEGLIGENCE, BREACH OF CONTRACT BY THE RELEASEES OR BREACH OF ANY STATUTORY OR OTHER DUTY OF CARE.

This agreement shall be effective and binding upon my heirs, next of kin, executors, administrators and assigns in the event of my death or incapacity.

Client's Name

Date

Client's Signature

Witness's Name

Date

Witness's Signature

Melanie Morrissette doing business
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