

Personal Information:

Name _____ DOB ____/____/____

Address: _____

City: _____ Postal Code: _____

Phone: _____

Emergency Contact Person: _____

Emergency Ph: _____ Relationship to contact: _____

Liability Waiver:

I, the undersigned, being aware of my own health and physical condition, and having knowledge that my participation in any exercise programming may be injurious to my health, am voluntarily participating in a physical activity. Although, my personal trainer will take precautions to ensure my safety. I expressly assume and accept sole responsibility for my safety and for any injuries that may occur. Having such knowledge. I waive and release any and all claims against my trainer, Roberta Mirandon.

Client's name (please print clearly)

_____ Date: _____