Personal Training Waiver and Release of Liability Griffins Training.com

Participant Details:	
Name:	
Date of Birth:	
Address:	
Phone Number:	
Email:	
Emergency Contact:	
Name:	
Phone Number:	
Acknowledgment and Assumption of Risk:	
I, the undersigned, acknowledge that participating in per	sonal training sessions involves physical activity
that has inherent risks. I agree to assume all risks associ limited to injury, illness, or other health-related issues. I	ated with my participation, including but not
Waiver and Release of Liability:	
In consideration of the personal training services provide	ed, I hereby release, waive, discharge, and hold
harmless [Trainer/Trainer's Business Name], its owners,	employees, representatives, and agents from
any and all claims, damages, or liabilities for injury, illne	ss, or damages that I may incur as a result of my
participation in personal training sessions, whether caus	sed by negligence or otherwise. Initials:
Medical Information:	
I confirm that I am in good health and do not have any me	edical conditions that would prevent me from
engaging in physical activity. I understand that it is my re	sponsibility to consult with a healthcare
professional before starting any new exercise program. I	nitials:
Photo/Video Release:	
I grant permission for photographs and videos taken duri	ng training sessions to be used for promotional
purposes. Initials:	
Cancellation Policy:	
I understand the cancellation policy and agree to provide	e at least 8 hours' notice for any session
cancellations. Initials:	
Acknowledgment:	
I have read and understood this waiver and release. I agr	ee to abide by all instructions provided by my
trainer and to listen to my body's signals. Initials:	
Signature: Date: _	

Jenny Griffin Signature: