

**Waiver of Liability Form-** Balance Fitness Personal Training & Nutrition, LLC

I, the undersigned participant in this exercise class, as a condition of my participation, hereby waive any and all claims I may have now or in the future against my instructor, Paul Hood, Sierra Baker and Balance Fitness Personal Training & Nutrition, LLC, in connection with or arising out of my participation with this exercise class or any injury to myself related hereto.

I understand that any exercise program carries with it some risk and acknowledge that risk. I have consulted with my Dr and she/he agrees that this exercise program is appropriate for my current state of health.

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Signed

Date

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Phone Number

Email