Waiver of Liability and Informed Consent Release

This release, Waiver, and Hold Harmless Agreement is made by and between the **undersigned** and Move Vibes Fitness Center LLC (*MOVIBES)*, and entered into on the day, month and year noted below.

I subscribe to and accept the following:

MOVIBES shall not be liable for any damages arising from any personal injuries sustained by a guest or a member on or about the premises of *MOVIBES*. A guest or a member, in attending *MOVIBES* and using its facilities and equipment, does so at his/her own risk. A guest or a member assumes full responsibility for any injuries or damages which may occur to him/her using said facilities and he/she does hereby fully and forever release and discharge *MOVIBES*, its owners, employees and agents from any and all claims, demands, damages, rights of action, or causes of actions, present or future, whether the same be known or unknown, anticipated or unanticipated, resulting or arising out of a member's or a guest's use or intended use of the facilities and equipment of *MOVIBES*.

I warrant, represent and agree that I am in good physical condition and have no disability, impairment, or ailment preventing me from engaging in active or passive exercise that will be detrimental or inimical to health, safety, comfort, or physical condition if I do so engage or participate. **If my health condition changes or I become pregnant, I agree to inform *MOVIBES* and provide a note from my physician stating that I may continue my current exercise regime. I will take responsibility for my health and safety and avoid any exercises I have been advised by my physician not to do.** *MOVIBES* shall not be liable for the loss or theft of, or damage to, the personal property of a guest or a member.

I agree to keep and obey all the rules and regulations now in force or prescribed by *MOVIBES* for the use of its facilities and equipment.

PLEASE NOTE THE TERMS AND CONDITIONS OF THE SESSIONS

I understand that *MOVIBES* requires twelve (12) hours' notice for Group classes and Twenty Four (24) hours' notice for Private Classes for any change or cancellation. I will be billed for any session booked if the above notice is not given even if I reschedule in the same week.

_____ _____

Today's Date Client Signature

_____

Client Name (Capital Letters)

FOR MINORS ONLY

The undersigned is a parent or legal guardian of _____
(client herein), and on his/her behalf, hereby agrees to all the conditions set forth above.

_____ _____

Today's Date Client Signature