



Release of Liability

You (**PRINT NAME** _____), I agree that if you engage in any physical exercise or activity, you do so **entirely at your own risk.**

MEDICAL CONSENT, PHOTO RELEASE, RELEASE OF LIABILITY & TERMS:

In case of emergency, I authorize the JB Fit Club to obtain whatever medical treatment deemed necessary for my welfare. I further understand that I will be financially responsible for all charges and fees incurred in the rendering of said emergency treatment, regardless of whether or not my medical insurance covers such charges and fees. I hereby give my consent to my participation in the fitness classes, walks, hikes and other physical activities at the JB Fit Club which include both indoor and outdoor programs. I release the JB Fit Club and from any and all liability for injuries that may be incurred while doing any kind of activities indoor and outdoor sponsored by JB Fit Club as well as any medical treatment obtained for myself. I give JB Fit Club the irrevocable, perpetual, and unrestricted right to use photographs/video, media and manners for trade, promotion, exhibition, or website use. I understand there are no refunds for any classes. Having read and understood the conditions of this Medical Consent, Photo Release, Release of Liability & Terms.

I have carefully read this “waiver and release” and fully understand that it is a **release of liability**. By signing this release, I acknowledge that I understand its content and that this release cannot be modified orally.

Signed: _____

Printed Name: _____

Dated: ___/___/___

Email: _____

Phone: _____