



## Informed consent form for physical fitness program

### General statement of program objectives & procedures:

I understand that this physical fitness program includes exercises to build the cardio respiratory system (heart and lungs) the musculoskeletal system (muscle endurance and strength, and flexibility) and to improve body composition (decrease of body fat in individuals needing to lose fat, with an increased in weight of muscle and bone). Exercise may include aerobic activities (treadmill, walking, running, bicycle riding, rowing machine exercise, swimming and other aerobic activity's) callisthenic exercise. And weight lifting to improve muscular strength and endurance and flexibility exercise to improve joint range of motion.

### Description of potential risks:

I understand that the reaction of the heart, lung and blood vessel system to exercise cannot always be predicted with accuracy. I know there is a risk of certain abnormal changes occurring during or following exercises, which may include abnormalities of blood pressure or heart attacks. Use of the weight lifting equipment, and engaging in heavy body calisthenics may lead to musculoskeletal strains pain and injury if adequate warm –up gradual progression, and safety procedures are not followed. I understand that personal (seller) shall not be liable for any damages arising from personal injuries sustained by client (buyer) while and during the personal training program. Client (buyer) using the exercising equipment during the personal training program does so at his /her own risk. Client (buyer) assumes full responsibility for any injuries or damages which may occur during the training.

I hereby fully and forever release and discharge personal trainer (seller) its assigns and agents from all claims, Demands, Damages rights of action, present and future therein.

I state that I am in good health and good physical condition and have no disabilities preventing me from a complete exercise program (other then items discussed on health form

I have read and understood all the information given to me.

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Signature

Print Name

Date