



Release & Waiver of Liability

You, the **CLIENT**, acknowledge an assumption of risk and full release from liability of **SCOTTSDALE PILATES & YOGA**, 6500 N. Scottsdale Rd, 2nd Floor, Scottsdale, AZ 85253 **CLIENT** acknowledges that **Pilates**, Yoga, Barre, TRX, and Personal Training service programs include participation in strenuous physical activities, including, but not limited to Pilates equipment, mat Pilates, various aerobic conditioning machinery and equipment training offered by **SCOTTSDALE PILATES & YOGA**. (The “**PHYSICAL ACTIVITIES**”) **CLIENT** acknowledges these **PHYSICAL ACTIVITIES** involved the inherent risk of physical injuries or other damages, including, but not limited to heart attacks, muscle strains, pulls or tears, broken bones, shin splints, heat prostration, knee/lower back/upper back/tendon/joint/foot injuries and other ailments, illness soreness or injury however caused, occurring during or after **CLIENT’S** participation in the **PHYSICAL ACTIVITIES**. **CLIENT** further acknowledged that such risks include, but are not limited to injuries caused by negligence of an instructor or other person, defective or improperly used equipment, over exertion of **CLIENT**, or an unknown health problem of **CLIENT**. **CLIENT** agrees to assume all risk and responsibility involved with the participation in the **PHYSICAL ACTIVITIES**. **CLIENT** affirms that **CLIENT** is in good physical condition and does not suffer from any disability that would prevent or limit participation in the **PHYSICAL ACTIVITIES**. **CLIENT** acknowledges participation will be physically and mentally challenging and **CLIENT** agrees that it is the responsibility of **CLIENT** to seek competent medical and other professional advice, regarding any concerns or questions involved with the ability of **CLIENT** to take part in the **PHYSICAL ACTIVITIES**. By signing this Release and Waiver of Liability, **CLIENT** asserts that he or she is capable of participation in the **PHYSICAL ACTIVITIES**. **CLIENT** agrees to assume all risk and responsibility for not exceeding his or her physical limits. **CLIENT**, on behalf of **CLIENT**, his or her heirs, assigns, and next of kin, agrees to fully release **SCOTTSDALE PILATES & YOGA**, as well as any of its owner, employees, or other authorized agents, including independent contractors, from any and all liability, claims and/or any litigation actions that **CLIENT** may have for injuries, disability or death, or other damages of any kind, including, but not limited to punitive damages, arising out of participation in **PHYSICAL ACTIVITIES**, even if caused by negligence, gross negligence, intentional acts or omissions, and/or other type of fault of **SCOTTSDALE PILATES & YOGA**, its owners, employees, or other authorized agents, including independent contractors.

Client Name

Date

Client Signature

Guardian Name

Guardian Signature

Email

Phone

City

State