



Client Contact Information

Note: All personal information is held securely in accordance with the appropriate legislation, is confidential and treated appropriately.

Client Information

First Name: _____ Last Name: _____

Telephone Numbers/Contact Details

Cell: (_____) _____ - _____ Home: (_____) _____ - _____ Work: (_____) _____ - _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Email Address: _____

Date of Birth: _____ Circle One: Male or Female

How did you hear about us? _____

Emergency Contact

First Name: _____ Last Name: _____

Relationship to You: _____ Phone Number: (_____) _____ - _____

Additional Information

List any health problems, injuries, or illnesses that we should be aware of (for example, heart problems, diabetes, high blood pressure, knee injury, etc.): _____

What type of exercise program have you done/enjoyed doing in the past? _____

What are your fitness goals? _____

WAIVER OF LIABILITY, INFORMED CONSENT, AND INDEMNIFICATION AGREEMENT

I, _____ (print full name), in consideration of my voluntary enrollment and participation in the health and fitness classes, events and activities offered by Discover True You, Inc. – Ballet Fusion Fitness (“BFF”) and/or use of the property, facilities and services provided by BFF, do hereby agree for myself or, (if applicable), for the members of my family to the following:

I understand in the context of this agreement that “BFF” includes Discover True You, Inc., Ballet Fusion Fitness, its owner(s), officers, employees, volunteers, agents, and instructors, regardless of the nature of their affiliation with BFF (“BFF Affiliates”). I further understand that this agreement and waiver of liability extends to all BFF Affiliates and the property, facilities, and services provided by BFF, including all activities and events hosted by BFF at varying locations.

I understand it is my responsibility to communicate any physical (including health concerns such as diabetes, heart problems, seizures, pregnancy, and asthma) and/or psychological concerns/limitations that might conflict with my participation in services provided by BFF to the appropriate BFF Affiliate. By enrolling in each class and/or event, I acknowledge and represent that I am physically and mentally capable of performing the physical activities involved. I recognize that the classes and events offered by BFF may involve strenuous physical activity including, but not limited to, muscle strength training, endurance training, cardiovascular conditioning/training, and other various fitness activities. It is my responsibility to inform the appropriate parties if there are activities with which I do not feel comfortable and promptly report any unusual feelings such as chest discomfort, nausea, dizziness, breathing, or injury during an activity.

I recognize there are certain inherent risks associated with my participation in the classes, events and activities offered by BFF. I hereby release BFF from any liability, now or in the future, for any and all conditions that may result from my participation including, but not limited to, heart attacks, muscle strains, muscle pulls, muscle tears, broken bones, shin splints, heat prostration, injuries to knees, injuries to back, injuries to foot, or any other illness or soreness that may occur, including death. I assume full responsibility for personal injury to myself or others whether caused by the fault of myself, my family, BFF or other third parties.

I agree to indemnify and defend BFF against all claims, causes of action, damages, judgments, costs or expenses, including attorney fees and other litigation costs, which may in any way arise from my or my family’s participation with BFF. I agree to pay for all damages to the facility and/or property of BFF and any other facility or property utilized by BFF during an off-site event or activity caused by my or my family’s negligent, reckless, or willful actions.

I agree to observe and obey all posted rules and warnings, and further agree to follow any oral instructions or directions given by BFF and understand that any legal or equitable claim that may arise from participation in the above shall be resolved under Arizona law.

I, on behalf of myself, my heirs, personal representatives, or assigns, do hereby release, waive, and discharge BFF and all BFF Affiliates from liability from any and all claims arising from my participation in the services, activities and events offered by BFF.

I HAVE READ THIS DOCUMENT AND UNDERSTAND IT. I FURTHER UNDERSTAND THAT BY SIGNING THIS RELEASE, I VOLUNTARILY AGREE TO ITS TERMS AND CONDITIONS. SIGNATURE OF PARENT OR GUARDIAN IS REQUIRED FOR A MINOR.

Print Name

Date

Signature of Client / Signature of Parent or Guardian if participant is a minor

Date