



I, _____, have agreed to voluntarily participate in an exercise program, including but not limited to, strength training, flexibility development, and aerobic exercise, under the guidance of a personal trainer employed by Lynx Wellness LLC. I hereby stipulate and agree that I am physically and mentally sound and currently have no physical conditions that would be aggravated by my involvement in an exercise program. I have provided verification from a licensed physician that I am able to undertake a general fitness training program.

I understand and am aware that physical-fitness activities, including the use of equipment, are potentially hazardous activities. I am aware that participating in these types of activities, even when completed properly, can be dangerous. I agree to follow the verbal instructions issued by the trainer. I am aware that potential risks associated with these types of activities include, but are not limited to: death, fainting, disorders in heartbeat, and serious neck and spinal injuries that may result in complete or partial paralysis or brain damage, serious injury to virtually all bones, joints, ligaments, muscles, tendons and other aspects of the musculoskeletal system, and serious injury or impairment to other aspects of my body, general health, and well-being

I understand that I am responsible for my own medical insurance and will maintain that insurance throughout my entire period of participation with Lynx Wellness LLC. I will assume any additional expenses incurred that go beyond my health coverage. I will notify my personal trainer at Lynx Gym of any significant injury that requires medical attention (such as emergency care, hospitalization, etc.).

Although my trainer at Lynx Gym will take precautions to ensure my safety, I expressly assume and accept sole responsibility for my safety and for any and all injuries that may occur. In consideration of the acceptance of this entry, I, for myself and for my executors, administrators, and assigns, waive and release any and all claims against Lynx Wellness LLC and any of their staffs, officers, officials, volunteers, sponsors, agents, representatives, successors, or assigns and agree to hold them harmless from any claims or losses, including but not limited to claims for negligence for any injuries or expenses that I may incur while exercising or while traveling to and from training sessions, These exculpatory clauses are intended to apply to any and all activities occurring during the time for which I have contracted with my trainer and Lynx Wellness LLC

I represent and warrant I am signing this agreement freely and willfully and not under fraud or duress.

HAVING READ THE ABOVE TERMS AND INTENDING TO BE LEGALLY BOUND HEREBY AND UNDERSTANDING THIS DOCUMENT TO BE A COMPLETE WAIVER AND DISCLAIMER IN FAVOR OF LYNX WELLNESS LLC AND THE LYNX GYM, I HEREBY AFFIX MY SIGNATURE HERETO.

_____ Date: _____
Client's name (please print clearly)

Client's signature

Client's address

Client's email address

Parent/guardian signature (if applicable)