



"ITS JUST WORK"

CASH IN FITNESS

Health & Fitness Liability Waiver / Informed Consent Form

I _____, have joined **CASH IN Fitness Studio 6057 Executive Center Dr. Ste. 2, Memphis, TN. 38134**. I recognize that the fitness programs may involve strenuous physical activity including, but not limited to, muscle strength and endurance training, cardiovascular conditioning and training, and other various fitness activities. I hereby affirm that I am in good physical condition and do not suffer from any known disability or condition which would prevent or limit my participation in these exercise programs. I acknowledge that my enrollment and subsequent participation in purely voluntary and in no way mandated by **CASH IN Fitness Studio**.

"In consideration of my participation in this program,

"I _____, hereby release **CASH IN Fitness Studio** and its agents from any claims, demands, and causes of action as a result of my voluntary participation and enrollment."

"I fully understand that I may injure myself as a result of my enrollment and subsequent participation in this program and

"I _____, hereby release **CASH IN Fitness Studio** and its agents from any liability now or in the future for conditions that I may obtain. These conditions may include, but are 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 I may incur, including death.”

I HEREBY AFFIRM THAT I HAVE READ AND FULLY UNDERSTAND THE ABOVE STATEMENTS.

_____ (Participant Signature)

_____ (Date)