## **Personal Training Waiver and Release of Liability**

## **Acknowledgment of Risks and Voluntary Participation**

I acknowledge that I have voluntarily chosen to participate in a personal training program provided by Terry Teng. I understand that personal training involves physical activity, which carries inherent risks, including but not limited to:

- Muscle soreness, fatigue, or discomfort
- Sprains, strains, or joint/muscle injuries
- Cardiovascular stress or elevated heart rate
- Slips, falls, or equipment-related injuries
- Aggravation of any pre-existing condition or undiagnosed issue

I confirm that I am voluntarily engaging in these activities with full understanding and acceptance of the possible risks involved.

## **Medical Clearance and Responsibility**

I affirm that I am in good physical health and do not have any condition that would prevent me from safely participating in physical training sessions. I understand it is my responsibility to consult with a physician prior to starting any exercise program.

I agree to notify Terry Teng of any relevant changes to my health status, medical condition, or medications prior to each session.

## Waiver and Release of Liability

In consideration of being allowed to participate in personal training with Terry Teng, I hereby:

- Waive, release, and discharge Terry Teng, and any affiliated contractors or assistants, from any and all liability, claims, demands, causes of action, or damages, including those resulting from negligence, that may arise from participation in training sessions or related activities.
- This includes, but is not limited to, any injuries or incidents resulting from participation in kickboxing exercises or related movements, whether such exercises are conducted in person, virtually, or independently

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following instruction.

- Assume full responsibility for any and all injuries, losses, or damages that may occur during or after

participation.

- Agree to indemnify and hold harmless Terry Teng from any claims made by me or any third party as a result

of my participation.

Client Conduct and Safety

I agree to follow instructions and safety guidelines provided by Terry Teng. I understand that disrespectful

behavior, unsafe conduct, or failure to disclose medical conditions may result in refusal or termination of

service.

**Right to Refuse Service** 

I acknowledge that Terry Teng reserves the right to refuse service or turn away any client for any reason, at

any time, at his sole discretion. This includes but is not limited to concerns regarding health, safety, behavior,

or compatibility with the training program.

Acknowledgment and Agreement

By signing below, I confirm that I have read and understand this waiver in full. I agree to the terms and

acknowledge that I am voluntarily waiving certain legal rights.

Client Full Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_