



Kinetix Informed Consent

In consideration of Kinetix Health and Performance Center, representing “myself” to participate in its fitness related activities / programs

Assumption Of Risk: I understand that serious accidents occasionally occur during the participation in fitness related activities / programs, and that people participating in the exercises given, which might include such activities like strength training, stretching, yoga, pilates, circuit training, plyometrics, speed / agility training, golf conditioning / skill related movements and any other fitness related activities not mentioned above, might occasionally sustain mortal or serious personal injuries as a consequence.

Knowing the risks stated above, I hereby agree to assume all of the risks and have been informed of the possible dangers from participation in the above mentioned activities.

It is the intention of the undersigned by this instrument to exempt and release Kinetix Health and Performance Center it’s officers, directors, independent contractors, agents and employees from liability for personal injury or wrongful death.

Cancellation Policy: Kinetix requires a 24 hour notice or full service fee is applied. Please be prompt, late arrivals can only be extended to the time remaining in your scheduled session.

Client’s Signature

Date

Print Name

Parent / Guardian Signature

Date

Print Name