

# INFORMED CONSENT



\_\_\_\_\_  
Client Name

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Emergency Contact Name

\_\_\_\_\_  
Emergency Contact Phone Number

**I acknowledge that I have voluntarily chosen to participate in a program of intense physical exercise by a Business Name Trainer. I acknowledge that I have read and understand each of the statements below:**

### **Program Objectives and Procedures:**

I understand that this physical fitness program includes exercises to build the cardiorespiratory system (heart and lungs), the musculoskeletal system (muscle endurance and strength, and flexibility), and to improve body composition (decrease of body fat in individuals needing to lose fat, with an increase in weight of muscle and bone). All activities will be explained to you and demonstrated but you should feel free to ask any questions you may have at any point.

### **Description of Potential Benefits:**

I understand that this physical fitness program includes exercises and nutritional guidance that will improve strength, mobility and weight loss. All activities will be explained to you and demonstrated but you should feel free to ask any questions you may have at any point.

### **Description of Potential Risks:**

I understand that the reaction of the heart, lung, and blood vessel system to exercise cannot always be predicted with accuracy. I know there is a risk of certain abnormal changes occurring during or following exercise which may include abnormalities of blood pressure or heart attacks. Use of the weight lifting equipment and engaging in heavy body calisthenics may lead to musculoskeletal strains, pain and injury if adequate warm-up, gradual progression, and safety procedures are not followed. I understand that personal trainer shall not be liable for any damages arising from personal injuries sustained by client while and during the personal training program. Client using the exercising equipment during the personal training program does so at his/her own risk. Client assumes full responsibility for any injuries or damages which may occur during the training. I hereby fully and forever release and discharge personal trainer, its assigns and agents from all claims, demands, damages, rights of action, present and future therein. I understand and warrant, release and agree that I am in good physical condition and that I have no disability, impairment or ailment preventing me from engaging in active or passive exercise that will be detrimental to heart, safety, or comfort, or physical condition if I engage or participate. I state that I have read, understood and answered the Health Questionnaire (PARQ) honestly and have sought medical advice if I am in any doubt of my suitability to perform physical exercise and/or a nutritional plan.

**If, at any time, you feel undue pain or excessive discomfort stop the activity immediately and inform the instructor of your symptoms. You are free to withdraw from any activity at any time you wish.**

\_\_\_\_\_  
Client Signature

\_\_\_\_\_  
Date

