

# Declaration of Fitness Challenge Participation

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

To Whom It May Concern,

I, **[Your Name]**, hereby declare my intention to participate in the **[Name of Fitness Challenge]** scheduled to take place on **[Date of Event]**.

By signing this declaration, I confirm that I understand the physical demands of participating in this fitness challenge, and I affirm that I am in good health and capable of safely completing the activities involved.

I acknowledge that I have been advised to consult my physician prior to participation, especially if I have any pre-existing medical conditions that may affect my performance or health during this challenge.

Please consider this letter as an acknowledgment of my participation in this event and my acceptance of all associated risks.

Thank you for providing this incredible opportunity to promote health and fitness.

Sincerely,

**[Your Signature]**

**[Your Printed Name]**

**[Your Address]**

**[Your Contact Information]**