

Risk Waiver Statement

Date: _____

To Whom It May Concern,

I, **[Participant's Name]**, hereby acknowledge that I am voluntarily participating in the exercise classes provided by **[Exercise Studio Name]**. I understand that these activities carry inherent risks that may result in injury, including but not limited to muscle strains, slips, falls, or other physical injuries.

By signing this waiver, I release **[Exercise Studio Name]**, its owners, instructors, and employees from any liability for injury, loss, or damage to my person or property that may occur during my participation in these activities, whether due to negligence or otherwise.

I confirm that I am physically fit to participate in these exercise programs and have disclosed any medical conditions that may affect my participation.

By signing below, I acknowledge that I have read and understood this waiver and agree to its terms.

Participant's Signature: _____

Date: _____

Emergency Contact Name: _____

Emergency Contact Number: _____