



Release of Liability Waiver & Assumption of Risk

Please read this Release of Liability of Waiver and Assumption of Risk Form in its entirety. If you understand and agree, please sign, and date the form. Each student must provide this form prior to participating in a Pilates Whole Body private, group or virtual Pilates session or group class. Thank you.

All exercises and other forms of physical activity can be dangerous, especially if performed without medical advice, proper supervision and/or pre-exercise evaluation. The techniques, ideas, and exercise suggestions presented in virtual, or in-person Pilates sessions are not intended to replace medical advice or intervention.

Participants should consult a physician or health care professional before performing any exercise program, including the virtual or in-person Pilates sessions presented herein.

The virtual or in-person Pilates participant performs all exercises, stretches, ideas and other techniques at his/her own responsibility and at his/her own risk.

Pilates Whole Body, LLC virtual or in-person Pilates instruction and its published content are not liable or responsible to any person or entity for any special, incidental, or consequential damage caused or alleged to be caused directly or indirectly by the information contained within.

I have read this Release of Liability of Waiver and Assumption of Risk Form in its entirety, and I agree.

Print First and Last Name

Sign First and Last Name

Date

Cell Phone number (Please print legibly, thank you.)

Email Address