

WAIVER OF LIABILITY AND INFORMED CONSENT RELEASE

This Release and Hold Harmless Agreement is made by and between the undersigned and Pilates Studio of Central Ohio, Inc., and entered into on the day, month, and year noted below.

1. The Pilates Studio of Central Ohio, Inc. provides space for and instruction in the STOTT Pilates Method, and the Exercise/Equipment created by Joseph H. Pilates and developed by those he taught. The parties to this agreement recognize that while the STOTT Pilates Method is not strenuous, participation in the activity could lead to physical injury to the client.
2. The client desires to undertake the Pilates Studio of Central Ohio’s program with the full knowledge of the possibility that physical injuries could result from it and desires to assume the risk of any such injury.
3. The parties recognize that the Pilates Studio of Central Ohio, Inc. will not be able to and will not provide its program to the client without execution of this agreement and our detailed client profile.

Therefore, client, in consideration of the above and of the exercises classes to be provided, hereby waives all claims for damage or loss to person or property which may be caused by any act, or failure to act, or Pilates Studio of Central Ohio, Inc. instructors, staff, landlord, and their officers, agents, or employees. Client also assumes the risk of any and all injuries that might result from participating in Pilates Studio of Central Ohio, Inc.’s exercise programs.

In consideration of my participation of Pilates Studio of Central Ohio, Inc.’s exercise program, I, _____, for myself, my heirs and assigns, hereby release Pilates Studio of Central Ohio, Inc., its employees and owners, from any claims, demands and causes of action arising from my participation in the exercise program. I hereby affirm that I have read and fully understand the above, am over 18 years of age or am a legally emancipated minor.

Today’s Date

Client Signature

Client Name (please print)

Client Address