INFORMED CONSENT AGREEMENT

Thank you for choosing Fun ’n Fit Mobile Fitness Services LLC . We request your understanding and cooperation in maintaining both your and our safety and health by reading and signing the following INFORMED CONSENT AGREEMENT:

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, acknowledge that I have either had a physical examination and been given my physician’s permission to participate or that I have decided to participate in activity without the approval of my physician and do hereby assume any and all responsibility during and after my participation in any exercise activity, and I do so ENTIRELY AT MY OWN RISK.

I understand the risks involved in undertaking any activity or program related to my health (including physical, mental, or emotional), and I am aware and responsible for the care scope with which I conduct myself in that activity or program. I acknowledge that my choice to participate in any activity, program, and/or service of

Fun ’n Fit, or any result stemming from any activity, program, or service of Fun ’n Fit, are done at my own risk.

I understanding that I am free at any time to withdraw from, reduce, and/or modify my involvement in any program, activity, or service and realize that I should do so upon recognition of any signs of transient lightheadedness, fainting, chest discomfort, leg cramping, nausea, or any other signs indicating that I am unable to continue with any of the activity, program, or service provided by Fun ’n Fit.

I acknowledge that I release Fun ’n Fit, without limitation, for all injuries which may occur as a result of any activity, program, and/or service provided by Fun ’n Fit. Furthermore, I acknowledge that I have inquired about the nature of the activity, program, and/or service that I am not completely familiar with, and I have been informed of all inherent risks.

I acknowledge that I have carefully read this (INFORMED CONSENT AGREEMENT) and understand that it is a release of liability. I expressly agree to release and discharge Fun ’n Fit and all of its affiliates, employees, agents, representatives, successors, contractors, or assigns from any and all claims or causes of actions and agree to voluntarily waive or release any rights that I may have otherwise to bring legal action against Fun ’n Fit for personal injury or property damage.

I declare that I have read, understood, and agree to the contents of this INFORMED CONSENT AGREEMENT in its entirety.

Sign Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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