



## **Atlas Pilates LLC**

### Release and Waiver of Liability

The Participant is aware that practicing Pilates Method exercise may result in accident or injury, and Participant assumes the risks associated with the exercise. The Participant understands and acknowledges their own good health and suffers from no known physical impairment which would limit their use of Atlas Pilates apparatus or facilities. Participant acknowledges that Atlas Pilates has not and will not render any medical services, including medical diagnosis of Participant's physical condition. Participant specifically agrees that Atlas Pilates, its officers, employees, and agents, shall not be liable for any claim, demand, cause of action of any kind whatsoever for, or on account of death, personal injury, property damage or loss of any kind, resulting from or related to Participant's use of the facilities or participation in any exercise or activity within or without the Atlas Pilates premises, and Participant agrees to hold Atlas Pilates harmless from same.

I have read the above release and waiver of liability and fully understand its contents. I voluntarily agree to the terms and conditions stated above.

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

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

---

For Office Use Only:

Client Name: \_\_\_\_\_

Client ID #: \_\_\_\_\_