



1. **Sculpt Studio Fitness Classes.** I understand that the fitness classes and instruction offered by Sculpt Studio involve physical exertion and, like any physical activity, can result in injury even if exercises are performed correctly. I will follow all instructions given to me by Sculpt Studio instructors as to which exercises to perform and how to perform them. I understand that any deviations by me from such instruction could lead to injury and is at my own risk. I understand that during classes, instructors may at times correct my form with appropriate physical contact.
2. **My health.** I am in good physical health. I have no condition, impairment, or illness that prevents me from participating in Sculpt Studio fitness classes or which makes injury more likely. If I am under the care of a physician, or if I have any concerns about my ability to participate in Sculpt Studio classes from a medical perspective, I have consulted with my doctor and have received permission to participate in Sculpt Studio fitness classes. If there is any change in my physical health that does or could affect my ability to safely participate in Sculpt Studio fitness classes, I will notify Sculpt Studio.
3. **Liability Release and Waiver of Claims.** To the maximum extent permitted by law, I hereby release Sculpt Studio LLC, its members, managers, contractors, and instructors for any and all injuries or other harm or losses suffered by me while participating in Sculpt Studio fitness classes or while otherwise on the premises of Sculpt Studio. To the maximum extent permitted by law, I hereby expressly and knowingly waive any and all rights I may have to sue or otherwise bring a claim against Sculpt Studio, its members, managers, contractors, and instructors relating to any such injuries, harm or loss.
4. **Photo Release.** I hereby grant Sculpt Studio unlimited permission to use my likeness in a photograph, video, or other print or digital media in any and all of its publications, including web-based publications, without any payment or consideration.
5. **Sculpt Studio Cancellation and Other Policies.** I have read and understood Sculpt Studio's cancellation and other policies regarding participation in Sculpt Studio fitness classes, as reflected on Sculpt Studio's web site. I understand that those policies may be changed by Sculpt Studio from time to time, and I agree to be bound by such revised policies effective as of their posting on the web site. Without limiting the foregoing, I understand that if I sign up for a class and fail to cancel within the specified cancellation period, **I will be charged for the full cost of the class.**

By signing below, I acknowledge that I have read, understood, and agree to be bound by the foregoing terms. I am 18 or over, or, if I am not, my parent or legal guardian has signed where indicated below.

PRINT PARTICIPANT'S NAME

Signature

Date

Mobile Phone#

email

I am the parent or legal guardian of the person named above, and by signing below, I acknowledge that I have read, understood, and agree to be bound by the foregoing terms on their behalf.

PRINT PARENT/GUARDIAN NAME

Signature

Date