

**Waiver, Release, and
Assumption of Risk Form**



**732-962-6519
Mach1Barbell.com
Mach1Barbell@gmail.com**

MACH 1 BARBELL

This form is an important legal document. It explains the risks you are assuming by participation in an exercise program. It is important that you read and understand it completely. After you have done so, please print your name legibly and sign in the spaces provided at the bottom.

Waiver, Informed Consent, and Covenant Not to Sue

I have volunteered to participate in a physical competition under the direction of Mach 1 Barbell, LLC which will include, but may not be limited to, weight and/or resistance training. In consideration of Mach 1 Barbell's, LLC agreement to instruct, assist, and train me, I do here and forever release and discharge and hereby hold harmless Mach 1 Barbell, LLC, and their respective agents, heirs, assigns, and employees from any and all claims, demands, damages, rights of action or causes of action, present or future arising out of or connected with my participation in this or any exercise program including any injuries resulting there from. THIS WAIVER AND RELEASE OF LIABILITY INCLUDES, WITHOUT LIMITATION, INJURIES WHICH MAY OCCUR AS A RESULT OF (1) EQUIPMENT THAT MAY MALFUNCTION OR BREAK (2) ANY SLIP, FALL, DROPPING OF EQUIPMENT AND (3) OUR NEGLIGENT INSTRUCTION OR SUPERVISION.

Assumption of Risk

I recognize that exercise might be difficult and strenuous and that there could be dangers inherent in exercise for some individuals. I acknowledge that the possibility of certain unusual physical changes during exercise do exist. These changes include abnormal blood pressure; fainting; disorders in heartbeat; heart attack; and in rare instances, death.

I understand that as a result of my participation, I could suffer an injury or physical disorder that could result in me becoming partially or totally disabled and incapable of performing any gainful employment or having a normal social life. I acknowledge and agree that I assume the risks associated with any and all activities or exercise in which I participate.

I ACKNOWLEDGE THAT I HAVE THOROUGHLY READ THIS WAIVER AND RELEASE AND FULLY UNDERSTAND THAT IS A RELEASE OF LIABILITY. BY SIGNING THIS DOCUMENT, I AM WAIVING ANY RIGHT I OR MY SUCCESSORES MIGHT HAVE TO BRING A LEGAL ACTION OR ASSERT A CLAIM AGAINST MACH 1 BARBELL, LLC OR OTHERS REFERRED TO IN THIS DOCUMENT FOR ANY NEGLIGENCE OR THAT OF OUR EMPLOYEES, AGENTS, OR CONTRACTORS.

Participants signature (parent/guardian if under 18)

Date

Physical Activity
Readiness Questionnaire
(PAR-Q)



732-962-6519
Mach1Barbell.com
Mach1Barbell@gmail.com

If you are planning to become more physically active than you are now, start by answering the seven questions in the box below. If you are between the ages of 15 and 69, the Par-Q will tell you if you should check with your doctor before you start. If you are over 69 years of age and you are not used to being very active, check with your doctor. Common sense is your best guide when you answer these questions.

Please read the questions carefully and answer each one honestly.

CHECK YES OR NO

<u>YES</u>	<u>NO</u>	1. Has your doctor ever said that you have a heart condition <u>and</u> that you should only do physical activity recommended by a doctor?
<u>YES</u>	<u>NO</u>	2. Do you feel pain in your chest when you do physical activity?
<u>YES</u>	<u>NO</u>	3. In the past month, have you had chest pain when you were not doing physical activity?
<u>YES</u>	<u>NO</u>	4. Do you lose your balance because of dizziness or do you ever lose consciousness?
<u>YES</u>	<u>NO</u>	5. Do you have a bone or joint problem that could be made worse by a change in your physical activity?
<u>YES</u>	<u>NO</u>	6. Is your doctor currently prescribing drugs (for example, water pills) for your blood pressure or heart condition?
<u>YES</u>	<u>NO</u>	7. Do you know of <u>any other reason</u> why you should not do physical activity?

IF YOU ANSWERED YES TO ANY OF THE ABOVE QUESTIONS, PLEASE FOLLOW THE ADVICE IN THE BOX BELOW

- Talk to your doctor by phone or in person BEFORE you start becoming much more physically active or BEFORE you have a fitness appraisal. Tell your doctor about the PAR-Q and which questions you answered YES.
- You may be able to do any activity you want--- as long as you start slowly and build up gradually. Or, you may need to restrict your activities to those which are safe for you. Talk with your doctor about the kinds of activities you wish to participate in and follow his/her advice.
- Find out which community programs are safe and helpful for you.

IF YOU ANSWERED NO TO ALL QUESTIONS, PLEASE READ THE INSTRUCTIONS IN THE 2 BOXES BELOW

- You can start becoming much more physically active--- begin slowly and build up gradually. This is the safest and easiest way to go.
- You can take part in a fitness appraisal--- this is an excellent way to determine your basic fitness so that you can plan the best way for you to live actively.

DELAY BECOMING MORE ACTIVE IF:

1. You are not feeling well because of a temporary illness such as a cold or a fever--- wait until you feel better.
2. You are or may be pregnant--- talk to your doctor before you start becoming more active.

PLEASE NOTE: IF YOUR HEALTH CHANGES SO THAT YOU THEN ANSWER YES TO ANY OF THE ABOVE QUESTIONS, TELL YOUR FITNESS OR HEALTH PROFESSIONAL. ASK WHETHER YOU SHOULD CHANGE YOUR PHYSICAL ACTIVITY PLAN. INFORMED USE OF THE PAR-Q: THE CANADIAN SOCIETY FOR EXERCISE PHYSIOLOGY, HEALTH CANADA, AND THEIR AGENTS ASSUME NO LIABILITY FOR PERSONS WHO UNDERTAKE PHYSICAL ACTIVITY, AND IF IN DOUBT AFTER COMPLETING THIS QUESTIONNAIRE, CONSULT YOUR DOCTOR PRIOR TO PHYSICAL ACTIVITY.

I have read, understood and completed this questionnaire. Any questions I had were answered to my full satisfaction.

Signature _____

Date _____

Covid-19 Release of Liability
Waiver Agreement



732-962-6519
Mach1Barbell.com
Mach1Barbell@gmail.com

Mach 1 Barbell COVID-19 Release of Liability Waiver Agreement

In our efforts to ensure the safety and wellness of our clients, colleagues, staff, agents, and all event attendees, we want to ensure that we are taking necessary precautions and procedures as medical practitioners. Symptoms of COVID-19 can be asymptomatic, mild to severe and can include fever, cough, fatigue, shortness of breath, loss of smell/taste and GI dysfunctions. Symptoms may appear 2-14 days after exposure.

By attending your session/sessions, Mach 1 Barbell, LLC and its clients agree to the following:

1. I have not experienced any symptoms of illness including fever, cough, fatigue, and shortness of breath in the last 48 hours.
2. No one in my immediate household has experienced any of the above symptoms in the last 48 hours.
3. I have not knowingly been exposed to anyone diagnosed with the COVID-19 virus nor anyone currently under quarantine for the virus in the last 14 days.
4. By signing below, you and all attendees of your event release and hold harmless Mach 1 Barbell (and its employees, clients, and customers) of all liability if I should develop COVID-19 while fulfilling our services.

By signing this Waiver and Release of Liability (Agreement), Client waives and releases Mach 1 Barbell, LLC its agents, servants, employees, insurers, and successors, and assigns from any and all claims, demands, causes of action, damages, or suits at law and equity of any kind, including but not limited to claims for personal injury, property damage, medical expenses, loss of services, on account of or in any way related to or growing out of presence or involvement with the client or sessions.

I have read the Agreement and understand that by signing the Agreement, I have consented to be bound by these terms, including the waiver/release of any legal right Client may have to sue Mach 1 Barbell, LLC for any costs they incur because a claim or legal action is brought in violation of this Agreement.

Each party has read, understands, and agrees to the above terms. This Agreement may be executed by a party's signature transmitted by facsimile, and copies of this Agreement executed and delivered by means of facsimile signatures shall have the same force and effect as copies hereof executed and delivered with original signatures.

Participants signature (parent/guardian if under 18)

Date

How did you hear about us +
Photo & Video Release Form



732-962-6519
Mach1Barbell.com
Mach1Barbell@gmail.com

MACH 1 BARBELL

Please print your name legibly and sign in the spaces provided at the bottom.

How did you hear about us?

Answer: _____

Photography and Audio/Video Recording

I hereby grant, Mach 1 Barbell, LLC, and its legal representatives and assigns, the absolute and irrevocable right and unrestricted permission concerning any photographs that he/she has taken or may take of me or in which I may be included with others, to use, reuse, publish, and republish the photographs in whole or in part, individually or in connection with other material, in any and all media now or hereafter known, including the internet, and for purpose whatsoever, specifically including illustration, promotion, art, editorial, advertising, and trade, without restriction as to alteration; and to use my name in connection with any use if he/she so chooses. I am a legally competent adult and have the right to contract my own name. I have read this document and fully understand its contents. This release shall be binding upon me and my heirs, legal representatives, and assigns.

_____ YES

_____ NO

Participants signature (parent/guardian if under 18)

Date