

**F45 Health & Fitness Liability Waiver /  
Informed Consent Form**

I, the participant named below, have agreed to participate in the F45 workouts, exercise and training programs (“**Workouts**”).

I acknowledge and agree that the Workouts:

- are a recreational sport activity; and
- may involve strenuous physical activity including, but not limited to, muscle strength and endurance training, cardiovascular conditioning and training, and other various fitness activities.

I hereby affirm, and I affirm each time I participate in a Workout, that:

- I am in good physical condition and do not suffer from any known disability or condition which would prevent or limit my participation in this exercise program; and
- I am participating in the Workouts voluntarily and at my own risk.

I hereby release F45 Training Pty Ltd, Alpha Omega Fitness, LLC and their officers, agents and employees (the “**Released Parties**”) from any claims, demands, and causes of action as a result of my voluntary participation in the Workouts, to the extent permitted by law.

I fully understand that I may injure myself as a result of my participation in the workouts and I hereby release the Released Parties from any liability now or in the future for conditions that I may obtain directly or indirectly from participating in the Workouts, to the fullest extent permitted by law. These conditions may include, but are not limited to, heart attacks, muscle strains, muscle pulls, muscle tears, broken bones, shin splints, heat prostration, injuries to knees, injuries to back, injuries to foot, or any other illness or soreness that I may incur, including death.

**I HEREBY AFFIRM THAT I HAVE READ AND FULLY UNDERSTAND THE ABOVE STATEMENTS.**

\_\_\_\_\_ (Participant Signature)

\_\_\_\_\_ (Name of Participant)

\_\_\_\_\_ (Date)