TARA CRITES

## WAIVER. RELEASE AND INDEMNIFICATION AGREEMENT

I, \_\_\_\_\_\_\_(the undersigned "Participant") acknowledge that I have requested and agreed that Tara Crites provide me with physical fitness instruction and coaching in connection with Pilates and related exercise activities (collectively, "Physical Activity"). In consideration for such Physical Activity, I hereby acknowledge and agree to the following:

1. I am aware that there is a risk of injury from Physical Activity and that this risk may be significant, including the potential for paralysis or death. I acknowledge that I have no physical impairment, injuries or illnesses that will endanger me or others.

2. I knowingly and freely assume all such risk, both known and unknown, even if arising from the negligence of Tara Crites, her agents and/or employees.

3. I hereby agree, for myself and on behalf of my heirs, assigns, personal representatives and the like (collectively, "Representatives") to indemnify, release from liability and hold harmless Tara Crites, her agents and/or employees, for any accident, illness, death, loss, damage to person or property or other consequence suffered by me or by any other person arising or resulting directly or indirectly from my participation in Physical Activity to the fullest extent permitted by law. If I am injured or cause damage through my own negligence or intentional acts or omissions, I agree to assume any financial obligation (directly or through insurance) for any medical or other costs incurred including attorneys' fees. I acknowledge and agree that Tara Crites, her agents and/or employees are not responsible for any medical expenses or other damages incurred in connection with my participation in Physical Activity. IT IS MY INTENTION TO ASSUME ALL RISK OF PERSONAL INJURY, DEATH, PROPERTY DAMAGE OR OTHER HARM ASSOCIATED WITH MY PARTICIPATION IN PHYSICAL ACTIVITY. I AGREE ON BEHALF OF MYSELF AND MY REPRESENTATIVES, THAT I WILL NOT MAKE ANY CLAIM AGAINST TARA CRITES, HER AGENTS AND/OR EMPLOYEES, NOW WILL I SUE OR SEEK TO ATTACH THE PROPERTY OF TARA CRITES, FOR ANY LOSS OR DAMAGE RESULTING FROM MY PHYSICAL ACTIVITY.

4. I HAVE READ THIS DOCUMENT, UNDERSTAND THAT I GIVE UP VALUABLE LEGAL RIGHTS AND SIGN FREELY WITHOUT DURESS. If any portion of this agreement is held invalid, I agree that the remainder of the agreement shall remain in full legal force and effect.

Participant's Signature:	Date:
Printed Name:	
Emergency Contact:	Phone:
Relation:	