

MobCycle Waiver and Consent Form

I, _____, agree to participate in training services or fitness classes for the previously agreed upon fee. **I understand that I must cancel a fitness class at least 12 hours prior to the scheduled class. If I fail to do this, I will forfeit the session or class without a refund.** If I have an unlimited membership, I will be charged an \$15 cancellation fee. This fee will also be applied if I get into the class from the waitlist and do not show. I understand that this is not a medically supervised program and that training services or fitness classes are intended for healthy people with no medical conditions or risks, either physical or psychological. In addition to the terms above, I represent that I am in good physical condition and have no medical reason or impairment that might prevent me from participating in training services or fitness classes.

As such, I acknowledge that MobCycle LLC and/or my instructor did not give me medical advice before my training services or fitness classes and cannot give me any after my training services or fitness classes, related to my physical condition and ability to participate. If I have any health or medical concerns now or after my training services or fitness classes, I will discuss them with my doctor. The information provided to me and any testing provided by MobCycle LLC or my instructor is not intended to diagnose, treat, cure, or prevent any disease or give medical advice of any kind. If I have any existing medical conditions, before I can begin, I will present MobCycle LLC and instructor with a medical release, signed and dated by my personal physician. This release represents my physician's approval to participate in training services and fitness classes. I grant permission to my personal trainer to contact my physician/dietician or health care professional if I require medical supervision during my participation in training services or fitness classes.

Using the MobCycle LLC facility involves risk of injury to me, whether I or someone else causes it. Specific risks vary from one activity to another and the risks range from minor injuries to major injuries, such as catastrophic injuries including death. In consideration of my participation in the activities offered by MobCycle LLC and my instructor, I understand and voluntarily accept the risk and agree that MobCycle LLC, its officers, directors, employees, volunteers, agents and independent contractors will not be liable for any injury, including, without limitation, personal, bodily, or mental injury, economic loss or any damage to me, my spouse, guests, unborn child, or relatives resulting from the negligence of MobCycle LLC or anyone on MobCycle LLC's behalf or anyone using the facility whether related to exercise or not. Further, I understand and acknowledge that MobCycle LLC does not manufacture fitness or other equipment at its facility but purchases and/or leases equipment. I understand and acknowledge that MobCycle LLC and my instructor are providing recreational services and may not be held liable for defective products.

This Agreement is not effective until it is signed and dated.

By signing, I acknowledge and agree to all the terms of this Agreement and acknowledge that I have received a copy of it.

Name _____ Pronouns _____

Date _____ Phone _____

Email _____ D.O.B. _____