



NATURAL HEALTH CARE CENTER

Promoting Total Health Awareness

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WAIVER OF LIABILITY/INFORMED CONSENT FORM Studio/ Exercise/ Training

- 1) I understand I will pay before each visit or on a monthly or yearly basis.
- 2) I understand an additional charge will be made for a personal trainer's time in setting up an individualized exercise program.
- 3) I understand the Natural Health Care Center is not responsible for any lost or stolen items.
- 4) I understand that children under the age of 10 are not allowed on the equipment without direct supervision.



I, _____, have hereby enrolled in a program of physical activity including but not limited to weight training and various aerobic conditioning machinery offered by the Natural Health Care Center.

In consideration of my participation in the Natural Health Care Center's Training Studio Program, I _____, for myself, my heirs and assigns, hereby release the Natural Health Care Center (its employees, volunteers and owners), from any claims, demands and causes of action arising from my participation in the training program or testing.

I fully understand that I may injure myself as a result of my participation in the Natural Health Care Center's training program and I, _____

hereby release the Natural Health Care Center from any liability now or in the future including but not limited to heart attacks, muscle strains, pull or tears, broken bones, splints, heat prostration, knee/lower back/foot injuries and any other illnesses, soreness or injury however caused, occurring during, or after my participation in the training program or testing.

I agree to abide by the rules and regulations set up by the Natural Health Care Center.

I hereby affirm that I have read and fully understand the above.

Signature

Date

Parent/Guardian Signature (If under 18 years old)

Date

(Over, Please)

WAIVER OF LIABILITY/INFORMED CONSENT FORM (Cont'd)

Name _____

Address _____

City _____ State _____ Zip _____

Phone: Home _____ Work _____ Cell _____

E-Mail _____

Birth Date _____

Emergency Contact – Local Relative or Friend:

Name _____ Relationship _____

Phone: Home _____ Work _____ Cell _____

RULES/REGULATIONS
FOR THE USE OF EQUIPMENT/TRAINING STUDIO

1. You must be at least 18 years of age to use the training studio or have a parent/guardian sign the appropriate waiver form.
2. Proper workout attire is required. This includes shirt, shorts/pants and sneakers.
3. Jeans, sandals, work boots and street clothes are not permitted.
4. Foul language and horseplay are not allowed.
5. Any individual excessively dropping the weights or mistreating the equipment will be asked to leave.
6. Those using the training studio must clean the machines after use. Towels/paper towels and cleaning solutions are available in the training studio.
7. Please be considerate of training studio members and staff.

I have read and agree to abide by the above rules/regulations of the training studio.

Signature

Date

Parent/Guardian Signature (If under 18 years old)

Date