

Live In Fit

Medical Questionnaire, Informed Consent, Waiver, and Release Agreement 2012

Please read and fill out attached waiver and release, print two copies and submit one copy to Live In Fit, on 1st day of class. **Note spaces for boot camp fill up QUICKLY! We cannot guarantee your space until we have received your payment.** Payment can be received online via credit card on a secure server or can be sent as a check to Live In Fit 4920 Sunnybrook Ave, Buena Park, CA 90621.

RELEASE

This release is entered into between the undersigned and Live In Fit, its officers, subsidiaries, affiliates, instructors, and executors in addition to the Cities of Carson, Fountain Valley, Lakewood and Long Beach, and any cities where boot camps are held. The purpose of Live In Fit Boot Camp is to provide fitness instruction and coaching for various levels of athletes/individuals.

Full Name		Date of Birth: i.e. (01/01/2001)	
Address		Phone Number	
City		Cell Phone	
State		Email Address	
Zip		Form of payment	

How do you rate your fitness level (1-10), ten being highest?		How did you hear about us?	
Is this your first boot camp?		If you answered "no" when was the last camp you attended?	
Name of Emergency Contact		Phone Number of Emergency Contact.	

Please be sure that the camp location you wish to attend has the time you want available.

Camp Location Requested		Camp Time Requested	
Number of days attending camp: (2days or 4 days)			

Are you allergic to any medication (aspirin, penicillin, sulfa, etc.?)		List Medications	
Do you take any prescribed medication on a permanent or semi-permanent basis?		List Medications	
Do you have a seizure disorder (epilepsy)?		List Medications	
Do you have high blood pressure (hypertension)?		List Medications	
Do you have asthma?		List Medications	

Do you have diabetes?		Have you ever been found to be anemic (low blood count)?	
Do you have heart disease?		Do you have lung disease?	
Do you have kidney disease?		Do you have liver disease?	

Have you ever had a severe neck injury?		If yes, please describe:	
Have you ever been knocked out?		If yes, please describe:	
Have you ever had a broken bone or fracture in the past 2		If yes, please describe:	

years?			
Have you ever injured your back?		If yes, please describe:	
Do you have back pain?		Do you wear glasses or contact lenses?	
Have you had knee pain in the past 2 years that has disabled you for longer than one week?		If yes, please describe:	
Do you have other physical conditions which cause pain?		If yes, please describe:	
Describe any surgical procedures you have had in the past.		What are your goals for the next three months?	
Have you had your body fat tested?		If yes what percent is it?	
Are you training for a specific event?		If yes, please explain:	

NOTICE: It is wise to seek your doctor's advice before beginning any health/fitness/nutrition program!

RELEASE - continued

The undersigned hereby acknowledges that the following was explained to me and/or agrees to the following:

1. Acknowledges that Live In Fit Boot Camp and its Personal Trainers are not physicians, and are not trained in any way to provide medical diagnosis, medical treatment, or any other type of medical advice.
2. Acknowledges that coaching/training is another tool for teaching athletes/individuals about themselves, but that Live In Fit Boot Camp does not guarantee neither good nor bad will occur nor guarantees the training advice given by our Personal Trainers/Instructors including Live In Fit Boot Camp will produce good nor bad results.
3. Acknowledges that the undersigned has been informed if they feel tired, feel pain or feel out of the ordinary in any way either related to their training, or otherwise, that the undersigned should contact a physician at once.
4. Acknowledges that boot camps, aerobic classes, kick boxing, running, weight training, obstacle courses, and any other related sports are an extreme test of one's mental and physical limits and carry with it potential for serious injury and death. That the undersigned assumes the risks of participating in these types of events and activities, that they are fit, and they have a medical physician they can contact regarding any medical problems that they might develop.
5. The undersigned expressly waives, releases, discharges and agrees not to sue from any liability of death, disability, personal injury, or action of any kind Live I Fit Boot Camp, its instructors, or any facilities, cities or counties where camps are held, for the undersigned participating in said sporting events and/or training for said sporting events.
6. The undersigned agrees that this is the full agreement between the parties, that Live In Fit Boot Camp, neither its instructors nor anyone else has not verbally contradicted any of the terms of this release and that the undersigned has entered into this agreement free and voluntarily without force or coercion.
7. Camper/Client agrees to confidentiality respect Live In Fit Boot Camp and all services provided and agrees to refrain from disclosing, directly or indirectly, any and all aspects of Live In Fit Boot Camp. The undersigned agrees to a non-compete within a 50-mile radius of Live In Fit Boot Camp for a period of 5 years from date of participation.

PERFORMANCE PLEDGE

In the spirit of harnessing your best effort and providing optimum results from your Boot Camp experience, we have established the following policies to which you will need to adhere. Please read and initial each one.

	I agree that I will not consume alcohol during the month of Boot Camp.
	I agree not to use 4-letter words during Boot Camp, except Yeah!
	I agree not to eat or say the words: donuts, cookies or cupcakes during Boot Camp.
	I agree to show up every day unless it is an excused absence
	I will arrive at camp ON TIME.
Any violation of the above statements will result in twenty push-ups per occurrence	

Checkmark the following:

	I understand that photos or video <i>may be taken</i> during the course of my involvement in Boot Camp, which may be used for promotional purposes only. I understand that no "before & after" photos will be used for any promotional purposes.
	I understand there is no refund policy, but I can receive a partial credit (for unused portion of camp) towards a future camp if I'm not able to complete the one I originally joined due to major injury (with a doctor's note). Camp fees cannot be used towards any other products or services provided by Live In Fit Boot Camp.
	I understand that diet and nutrition will affect my fitness goals and performance during boot camp.
	I agree to all Terms and Conditions listed above.

FULL NAME	SIGNATURE	DATE

Make sure to print two copies of this form and save one for your records!