## Mike's Mobile Gym Informed Consent Form

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I, \_\_\_\_\_\_, acknowledge that I have voluntarily chosen to participate in a program of progressive physical exercise by a MMG Personal Trainer. I understand such a program can enhance the musculoskeletal and cardiorespiratory systems. I also understand there are inherent risks in participating in a program of strenuous exercise. I have been informed of the possible strenuous nature of a personal training program and the potential for unusual, but possible, physiological results including, but not limited to, abnormal blood pressure, muscle soreness, fainting, heart attack or death.

I have read and understand this term: \_\_\_\_\_ (initial)

I certify that the answers to the questions outlined on the Medical History (PAR-Q) form are true and complete to the best of my knowledge. I understand medical clearance may be required based on the answers I gave on the Medical History (PAR-Q) form. I understand and agree that it is my responsibility to inform my Personal Trainer of any conditions or changes in my health, now and on going, which might affect my ability to exercise safely and with minimal risk of injury.

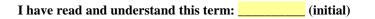
I have read and understand this term: \_\_\_\_\_ (initial)

I understand that I am not obligated to perform nor participate in any activity that I do not wish to do, and that it is my right to refuse such participation at any time during my training sessions. I understand that should I feel lightheaded, faint, dizzy, nauseated, or experience pain or discomfort, I am to stop the activity and inform my Personal Trainer. I give MMG Personal Trainers and the staff of the facilities I train in permission to seek emergency medical services for me should I become injured or ill with the understanding that I am responsible for any expenses incurred.

I have read and understand this term: \_\_\_\_\_ (initial)

**Cancellation Policies:** A <u>Single (1) Hr Session</u> requires a **24** hours notice for cancellation to avoid being charged for (1) session. Core Fit and Xtreme Fit Packages allow (**2**) emergency cancellations with or without 24 hours notice in its 4 week course and will <u>not</u> be charged for the session. Unfortunately, there are *NO EXCEPTIONS TO THESE CLAUSES! THESE POLICIES WILL BE STRICTLY ENFORCED*. The same respect goes to our clients, where your personal trainer must give 24 hours notice for cancellation of a <u>Single (1) Hr Session</u>. If an emergency arrives and the trainer cannot make it to the present destination, the client will be credited for that (1) session or will have the opportunity to reschedule at a mutually convenient time.

Training sessions are one hour in length. The hour will begin when your trainer arrives at the predetermined meeting place (i.e. your house or office). If you are not ready at that time or are interrupted during your training session, your one hour time limit will <u>not</u> be extended. Therefore, it is recommended that you prepare in advance for the arrival of your trainer. Sessions can be performed at your home, home gym, office, or anywhere you need it to be, if allowed. Some geographical restrictions apply to this policy. Determination of an out of range training site is left completely to the discretion of MMG. In the event that you are not at your predetermined meeting place (i.e. your house or office) at your scheduled meeting time, your trainer is required to wait 15 minutes past the scheduled meeting time. If after 15 minutes has passed, and you have not shown for your training session, your trainer is permitted to leave and (1) session will be charged. I understand that MMG Personal Trainers recommend that all sessions be attended to ensure health/fitness progress and consistency.



By signing this document, I assume all risk for my health and well-being and hold harmless of any responsibility, the instructor, facility or any persons involved with this program and testing procedures. I understand that questions about exercise procedures and recommendations are encouraged and welcomed.

I have read, understood and completed this questionnaire. Any questions I had were answered to my full satisfaction.

Client Name (Please Print)

Signature

Today's Date

Witness