

**RELEASE AND WAIVER**

Mandy Sau Yi Chan (“**Instructor**”) is an at-home/work personalized wellness and fitness program/sessions service provider.

I, \_\_\_\_\_ (“**Client**”), have requested Mandy Sau Yi Chan (“**Instructor**”) to conduct a personalized wellness and fitness program/sessions and voluntarily desire to participate in physical exercise, training and/or Pilates, Yoga, Somatic Movement Therapy sessions in my home/work site and understand and agree to the following:

1. I assume full responsibility while voluntarily participating in the training programs/sessions at my sole risk.
2. I have consulted a physician, and am in good physical condition and have no physical, medical or psychological conditions, disabilities, impairments or ailments, chronic or otherwise, which would preclude, impair or prevent me from engaging in active or passive exercise and /or activities. I ASSUME FULL RISK OF LOSS AND RESPONSIBILITY FOR DAMAGE TO MY HEALTH INCURRED WHILE TRAINING WITH THE INSTRUCTOR.
3. Instructor shall not be liable for any injuries to or death of Client, or be subject to any claim, demand, liability, injury or damages whatsoever, including, without limitation, those resulting from acts of active or passive negligence on the part of Instructor. Participant, individually, and on behalf of its respective executors, administrators, successors and assigns, does hereby expressly forever release and discharge Instructor (and Instructor’s contractors, subcontractors, employees, agents representatives and each of their heirs, successors and assigns, as appropriate) from and against any all claims, demands, liabilities, injuries, damages actions or causes of action arising from, connected with, resulting from or related to the training/exercise sessions.

I HAVE READ THE ABOVE STATEMENT AND UNDERSTAND THE CONDITIONS.

Client’s Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Witness: \_\_\_\_\_ Date: \_\_\_\_\_