FitX Inc.
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Soaring to New Strengths

Informed Consent

I, _____ **declare** that I intend to use some of the activities, facilities, programs and services (herein after called "Activities") offered by FITX INC**.** **I understand** that different people have different capacities for participating in the various Activities and for my choices to use or apply at my own risk, any portion of the instruction or guidance that I receive while participating in these Activities.

I understand that the risk involved in undertaking any of the Activities is related to my own state of fitness or health, and the awareness, care and skill with which I conduct myself in any of the Activities of FITX INC. I also understand that I am free to withdraw from, reduce or modify my involvement in any of the Activities and I realize that I should do so on recognition of any signs of physical discomfort.

I further understand that the possible risks involved in participating in these Activities may include muscle, tendon, ligament, bone and joint soreness; muscle, tendon and ligament strain, tear or rip; bruising, death; skin laceration; tears, cuts or punctures; shortness of breath, dizziness, fainting, or unconsciousness; tightness in chest, bone breaks, discoloration, separations or fractures; fatigue; sweating; eye punctures; heart attack or stroke; aggravation of an existing or past injury; discomfort or problem with any other injury; discomfort of physical problems associated with physical activity, and many other forms of physical discomfort.

I understand just as with other types of physical activity, that there are potential risks in physical fitness and accept all responsibility and waive any legal recourse against FITX INC., its servants, agents, contractors, instructors and employees from any claims resulting from the personal fitness program.

I have read the above list of possible risks associated with my participation in the Activities offered by FITX INC. _____ (Initial)

I consent to taking all of the above noted risks by VOLUNTARILY PARTICIPATING in the Activities of FITX INC.
_____ (Initial)

CANCELLATION POLICY

FITX INC. CrossFit classes are non-refundable.

I declare that I have read, understand and agree to the contents of the CANCELLATION POLICY and the INFORMED CONSENT AGREEMENT in its entirety.

Signature: _____ Date: _____