



Northwest Pilates and Wellness, LLC
7500 W Arrowhead Ave
Kennewick, WA 99336
509.736.3609

Agreement of Release and Waiver of Liability Class Registration Form

I, _____, hereby agree to the following:

That I am participating in the Pilates, GYROTONIC®, Yoga, and various other Health and Fitness Classes, Programs, or Workshops offered by Northwest Pilates and Wellness LLC(NWP), during which I may receive information and instruction about health and fitness. I understand that the NWP staff is no way liable for any information or instruction that is given.

I understand that it is my responsibility to consult my physician prior to and regarding my participation in any of the activities or programs offered by NWP. I represent and warrant that I am physically able and no medical conditions or limitations that would prevent my full participation in any of the programs or activities at NWP.

In consideration of being permitted to participate in any programs or activities, I agree to assume full responsibility for any risks, injuries, or damages known or unknown, which may occur as a result of participating.

In consideration of being permitted to participate in all programs and activities at NWP, I knowingly, voluntarily and expressly waive any claim against Northwest Pilates and Wellness LLC, its owners, instructors, contractors, and any affiliate of NWP for injuries or damages that I may sustain as a result of participation in any program.

I, my heirs or legal representatives' forever release, waive, and discharge, and covenant not to sue Northwest Pilates, instructors, owners, contractors, or affiliates for any injuries or death caused by their negligence or acts.

I have read the above release and waiver of liability and fully understand and agree with the contents and conditions stated above.

Name _____

Address _____ City _____ Zip _____

Phone (home) _____ (work) _____ (cell) _____

Email _____

Signature _____ Date _____

Class (*write in your selection*):

Mat Pilates:

Cost: \$ _____ /session

Send payment & registration to:

Northwest Pilates and Wellness, 7500 W. Arrowhead Ave, Kennewick, WA 99336

Payment & registration must be received one week prior to start of class. Minimum of 6 participants for class to be held. You will be contacted prior to start of course if minimum requirement is not met and class fee will be refunded.