

**Liability Waiver
Golf Fitness Program**

Please read this waiver thoroughly and let me know you agree by signing your full name and dating at the bottom before emailing either a picture or scanned copy of this back to me.

1. *I am voluntarily participating in a program or programs provided by **Joshua Crews**. I will be receiving instruction and information concerning fitness and wellness techniques, which may include weight training and other physical activities. I represent and warrant that I have no physical or mental health condition that would prevent my safe participation in these programs. I agree that if I am pregnant, or have a known cardiac arrhythmia (including very slow heart rate), a history of heart block, or if I am taking antipsychotic medications that may result in an adverse reaction in connection with physical activities, I will consult with and obtain the permission of a physician prior to engaging in any weight training or other physical activities in connection with these programs.*
2. *I am willingly and voluntarily assuming any risks, injuries or damages, known and unknown, which I might incur as a result of participating in these programs, and agree that **Joshua Crews** will not have any liability for such injuries or damages, to the maximum extent allowed by applicable law.*
3. *I acknowledge and agree that **Joshua Crews** is not a medical professional and does not provide any medical diagnoses or treatments. I agree that if I have any medical condition, I will seek the help of a medical professional.*
4. *To the maximum extent permitted by applicable law, I hereby (a) waive and release any claims, known or unknown, I may have against **Joshua Crews**, including its instructors, officers, directors and employees and agents, arising from or in connection with the services provided by **Joshua Crews** ("Claims") and agree to indemnify **Joshua Crews**, including its instructors, officers, directors and employees and agents, from and against any and all Claims.*
5. *I expressly waive all rights afforded by any statute which limits the effect of a release with respect to unknown claims.*

Please sign your name here: _____

Please date here: _____