



ASSUMPTION OF RISKS AND WAIVER OF LIABILITY:

In my capacity as parent or legal guardian, I hereby acknowledge the health risks and dangers associated with the transmission of the COVID-19 virus and other communicable diseases, and recognize that exposure to the COVID-19 virus, or other communicable diseases, could occur while my child is in the care of A Heart An Angel.

I hereby acknowledge, agree and understand that facilities, services involve risks of injury to my person and property and to the person or property of any minor for whom I have guardianship and have requested or allowed participation in the A Heart of an Angel GET FIT Class. By engaging in such use, or permitting such use by a minor, I voluntarily accept and assume full responsibility for such risks.

Therefore, in consideration of such participation, I agree that A Heart of an Angel, its successors, affiliates and related entities and their respective employees, volunteers, independent contractors and agents will not be liable for any injury to my person or property to the person or property of any Minor.

Further, on behalf of myself, my heirs (including any minors), personal representatives and assigns, I do hereby release, discharge and hold harmless AHOAA from all liability and claims arising from participation in the GET FIT Class. This waiver includes, but is not limited to, all liability and claims arising from personal injury or death, accidents or illness or damage to, loss of, or theft of property.

By signing below, I understand I am releasing AHOAA from all liability to me, my heirs, and Minors and our assigns for all losses and damage to me or a Minor, and I forever give up any claims therefor on account of injury to person or property, whether caused by the active or passive negligence of AHOAA or otherwise.

Minors NAME _____

Signature of Parent or Guardian _____

Address _____

Email _____

Date _____

****PLEASE LIST ANY KNOWN ALLERGIES, SURGERIES OR MEDICAL CONDITIONS BELOW****

