

**Marc Murray Life Coach, LLC/Marathon Athletics,
Inc/Marc Murray Elite Athletic Training
Personal Trainer Waiver & Release Form**

While training with Marc Murray Life Coach, LLC /Personal Trainer/ Marathon Athletics, Inc

I understand that physical exercise can be strenuous and subject to risk of serious injury, you are urged to obtain a physical examination from a doctor before participating in any exercise activity.

You (**PRINT NAME** _____) agree that if you engage in any physical exercise or activity, you do so **entirely at your own risk**.

Any recommendation for changes in diet including the use of food supplements and weight reduction products are entirely your responsibility and you should consult a physician prior to undergoing any dietary or food supplement changes.

You agree that you are voluntarily participating in these activities and **assume all risks** of injury, illness or death.

This waiver and release of liability includes, without limitation, all injuries which may occur as a result of: (a) your participation in any activity or personal training session and (b) instruction, training, supervision, or dietary recommendations by ***Marc Murray Life Coach/ Personal Trainer*** & Marathon Athletics, Inc

You acknowledge that you have carefully read this "waiver and release" and fully understand that it is a **release of liability**. You expressly agree to release and discharge ***Marc Murray Life Coach, LLC & Marathon Athletics, Inc*** from any and all claims or causes of action and you agree to voluntarily give up or waive any right that you may otherwise have to bring a legal action against ***Marc Murray Life Coach, LLC & Marathon Athletics, Inc*** for personal injury or property damage. To the extent that statute or case law does not prohibit release for negligence, this release is also for negligence on the part of the ***Marc Murray Life Coach, LLC & Marathon Athletics, Inc and Board Members of Journeys End***.

If any portion of this release from liability shall be deemed by a Court of competent jurisdiction to be invalid, then the remainder of this release from liability shall remain in full force and effect and the offending provision or provisions severed here from.

By signing this release, I acknowledge that I understand its content and that this release cannot be modified orally.

Signed: _____

Printed Name: _____

Parent Signature (If under the age 18)

Dated: ____/____/____