



F.I.T Challenge that's All About Health Contest Release Form

I, _____ hereby agree to the following:
I am participating in physical activities as part of the F.I.T Challenge. I recognize that any physical activity may be strenuous and may cause injury, and I am fully aware of the risks and hazards involved in such activities.

I represent and warrant that I am physically fit and I and have no medical condition that would prevent my full participation in these exercises. I understand that it is my responsibility to consult with a physician prior to and regarding my participation in this fitness challenge. If I have *any existing medical condition*, I have been cleared by my doctor to participate in this fitness challenge and will *explain the details as follows*: _____

I agree to assume full responsibility for any risks, injuries or damage, known or unknown, which I might incur as a result of participation in these activities or as a result of negligence. Also, I knowingly, voluntarily and expressly waive any claim I may have against F.I.T Institute Inc., All About Health Remedy'sRx or its agents for injury or damages that I may sustain as a result of participating in these activities.

Myself, my heirs or legal representatives forever release from liability, waive, discharge and covenant not to sue F.I.T Institute Inc., All About Health Remedy'sRx and its agents for any injury or death caused by any negligent act or omission. I have read the above release form and waiver of liability and fully understand its contents. I voluntarily agree to the terms and conditions stated above.

Signature of Participant:

_____ Date: _____

PHOTO, VIDEO & AUDIO RELEASE.

I hereby authorize and consent to the F.I.T Institute Inc. and All About Health Remedy'sRx and its partners using and publishing, in any location, form or format, photos and video or voice recording to promote this event.

Signature _____ Date _____