

# PACIFIC | NUTRITION & WELLNESS

Welcome to Pacific Nutrition and Wellness. It is our goal to provide you with the best possible nutrition and fitness therapy for your individual needs. While nutrition and fitness therapy can help prevent chronic illnesses and alleviate certain problems it does not replace the need for medical care or medicine that your doctor has prescribed. It is important to contact your primary care physician with any medical concerns. All diets and recommendations are in compliance with the guidelines set by the American Dietetic Association. Your medical information is kept private however reports will be sent to your primary care physician unless you have requested in writing for them to not be sent.

I, \_\_\_\_\_, hereby agree to the following:

I understand that nutrition therapy is not a replacement for medical care. I do not hold Pacific Nutrition and Wellness liable for any medical problems that I have or am experiencing due to my dietary changes.

That I am participating in the Nutrition & Fitness Training Classes, Programs or Workshops offered by Pacific Nutrition and Wellness during which I will receive information and instruction about nutrition and fitness. I recognize that fitness programs require physical exertion that may be strenuous and may cause physical injury, and I am fully aware of the risks and hazards involved.

I understand that it is my responsibility to consult with a physician prior to and regarding my participation in Nutrition & Fitness Training, Classes, Programs or Workshops. I represent and warrant that I am healthy enough and have no medical condition that would prevent my full participation in the Exercise Training, Classes, Programs, or Workshops.

In consideration of being permitted to participate in Nutrition & Fitness Training Classes, Programs or Workshops, I agree to assume full responsibility for any risk, injuries or damages, know or unknown, which I might incur as result of participating in the program.

In consideration of being permitted to participate in Nutrition & Fitness Training Classes, Programs or Workshops, I knowingly, voluntarily and expressly waive my claim I may have against Pacific Nutrition and Wellness for injury or damages that I may sustain as a result of participating in the program.

I, my heirs, or legal representative forever release waive, discharge and covenant not to sue Pacific Nutrition and Wellness for any injury or death caused by their negligence or other acts.

I have read the above release and waiver of liability and fully understand its contents. I voluntarily agree to the terms and condition stated above.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Participate

If participant is under 18:

AS LEGAL GUARDIAN OF \_\_\_\_\_, I CONSENT TO THE ABOVE TERMS AND CONDITIONS.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of parents/Guardian of Participant

Witnessed By: \_\_\_\_\_