

WAIVER

In consideration of my exercise/diet program with Kazuko Aoyagi, I, intending to be legally bound, do hereby for myself and my heirs waive and release any and all rights and claims or damages I may accrue against Kazuko Aoyagi, for any and all injuries that may be suffered by me during training with her or on my own. I attest that I am physically fit and my physical condition verified by a licensed MD during the last 12 months. As part of the waiver I acknowledge that I have read and understand all of the above.

Name	Date
Address	
Phone number	
BILLING AGREEMENT	
Kaz works on a scheduled appointment basis. In order to effectively use her time, she asks that clients give her 24- hour notice when canceling an appointment. This means a cancellation should be made at least 24 hours before the scheduled appointment. Personal training sessions canceled inside 24 hours of the scheduled appointment will be billed at the normal rate of a single session to the client, or clients (in the case of a group session.) Fees must be pre-paid or paid on the same day of the session.	
Ι	have read the aforementioned and understand and
accept these policies.	
Acknowledged and Agreed.	
Client signature	Date
Trainer	Date