



# CHEVY CHASE AT HOME

We Are Neighbors Helping Neighbors Stay At Home

Post Office Box 15102

Chevy Chase, MD 20825

Telephone 301-657-3115

## Waiver and Release for Gentle Seated Pilates/Balance

In consideration of being permitted to participate in the Gentle Seated Pilates/Balance exercise class ("Class"), sponsored by Chevy Chase At Home (CC@ H):

1. I recognize that CC@ H is not responsible for the content or teaching of this class and makes no warranties, and specifically disclaims any warranties, with respect thereto.

2. I am participating in the class upon the express agreement and understanding that I am hereby waiving and releasing the Chevy Chase United Methodist Church; CC@ H, its officers and employees; and instructor Irene Koegel from any and all claims, costs, liabilities, expenses or judgments including attorneys' fees and court costs (herein, collectively referred to as "claims") arising out of my participation in the aforesaid class and any illness injury or death resulting therefrom, and hereby agree to indemnify and hold harmless the Chevy Chase United Methodist Church; CC@ H, its officers and employees; and instructor Irene Koegel from and against all such claims except claims proximately caused by the gross negligence or willful misconduct of CC@ H.

**3. Description of Potential Risks:** I understand that no exercise program is without inherent risks and that, regardless of the care taken by my instructor, he/she cannot guarantee my personal safety. When participating in any exercises or conditioning activity, there is always a possibility that minor injuries, major injuries, or catastrophic injury/death may occur.

**4. Client Responsibilities:** I understand that it is my responsibility to: 1) fully disclose any health issues (including diabetes, heart problems, seizures, osteoporosis and asthma); 2) inform the instructor if there are activities with which I do not feel comfortable or a doctor has prohibited; 3) cease exercise and report promptly any unusual feelings (e.g., chest discomfort, nausea, dizziness, breathing, apparent injury) during the exercise program; and 4) clear my participation with my physician.

5. As a participant in any program or class offered at Chevy Chase United Methodist Church, I recognize and acknowledge that there are possible risks of physical injury, and I agree to assume the full risk of injuries, including death, damages or loss that I may sustain as a result of participating in any activities connected or associated with such program or class.

6. I am over the age of eighteen years and competent to enter into this waiver and release. I hereby execute and deliver this waiver and release voluntarily and with full understanding of the contents and consequences thereof and to induce CC@ H to permit me to participate in this class at Chevy Chase United Methodist Church. This waiver covers this session and any subsequent Gentle Seated Pilates/Balance sessions in 2018.

\_\_\_\_\_  
Signature of Participant

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

Read and sign this release form and return it to Chevy Chase At Home at the above address or bring to the first day of class.