

Whirling Thunder Wellness Center Informed Consent Form



General Statement of Program Objectives and Procedures:

I understand that this physical fitness program includes exercises to build the cardio-respiratory system (heart and lungs), the musculoskeletal system (muscle endurance and strength, and flexibility), and to improve body composition (decrease of body fat in individuals needing to lose fat, with an increase in weight of muscle and bone). Exercise may include aerobic activities, callisthenic exercises, and weight training to produce said benefits.

Description of Potential Risks:

I understand that the reaction of the heart, lung, and blood vessel system to exercise cannot always be predicted with accuracy. I know there is a risk of certain abnormal changes occurring during or following exercise which may include abnormalities of blood pressure or heart attacks. Use of weight lifting equipment, cardiovascular equipment and engaging in body calisthenics may lead to musculoskeletal strains, pain and injury. I understand that the Whirling Thunder Wellness Center and any of its programs along with any employee associated with the Wellness Center shall not be liable for any damages arising from personal injuries sustained by participants while and during usage of the Whirling Thunder Wellness Center, its programs, and its equipment.

Description of Potential Benefits:

I understand that a program of regular exercise for the heart, lungs, muscles and joints, has many benefits associated with it. These may include a decrease in body fat, improvement in blood fats and blood pressure, improvement in physiological function, and decrease in heart disease.

I have read the foregoing information and understand it. Any questions which may have occurred to me have been answered to my satisfaction.

Signature of Participant or Guardian: _____ Date _____