

MZ FIT CLUB

CLIENT AGREEMENT, LIABILITY WAIVER & EMS CONSENT FORM

PERSONAL INFORMATION

Full Name: _____

Date of Birth: _____

Phone Number: _____

Email Address: _____

Emergency Contact Name & Number: _____

Date: _____

SERVICES (Please select your service)

- EMS Training
 - Personal Training
 - Group Training
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PACKAGE & MEMBERSHIP POLICY

- All training packages are valid for ONE MONTH starting from the date of the first session.
 - Any unused sessions remaining after one month will automatically expire.
 - Unused sessions are considered forfeited and are non-refundable.
 - Sessions are non-transferable unless approved by management.
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CANCELLATION & LATE POLICY

- Sessions canceled less than 24 hours before the appointment will be considered used.
- No-show appointments will result in loss of that session.
- Clients arriving late may receive a shortened session depending on availability.

HEALTH & MEDICAL QUESTIONNAIRE

- Heart disease or cardiovascular condition
 - Pacemaker or implanted electrical device
 - Diabetes
 - Epilepsy or seizures
 - Cancer
 - Pregnancy
 - Recent surgery or injury
 - Back pain or spinal condition
 - Neurological disorders
 - Multiple sclerosis (MS)
 - Skin irritation or open wounds
 - Any other medical condition: _____
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EMS TRAINING SAFETY GUIDELINES

- Proper hydration before and after EMS sessions is essential.
 - Avoid alcohol, drugs, or intoxicating substances before training.
 - Avoid applying body lotion or oils before EMS training.
 - Inform your trainer immediately if you experience dizziness, pain, nausea, breathing difficulty, or discomfort.
 - Mild muscle soreness and fatigue may occur after EMS sessions.
 - Follow all trainer instructions regarding exercise and EMS intensity.
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EMS CONTRAINDICATIONS

EMS training may NOT be suitable for individuals with:

- Pacemakers or implanted electrical devices
- Pregnancy

- Severe cardiovascular disease
 - Epilepsy or seizure disorders
 - Active cancer
 - Severe neurological disorders
 - Severe kidney disease
 - Open wounds or severe skin irritation
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TRAINING AGREEMENT

I understand that participation in EMS training, personal training, and group training involves physical exertion and potential risks of injury.

I voluntarily participate in all activities and accept full responsibility for my participation.

I agree to follow all trainer instructions and inform my trainer immediately about any pain, injury, or medical changes.

LIABILITY WAIVER & RELEASE

I voluntarily release and discharge MZ Fit Club, its owners, trainers, employees, and affiliates from any liability, injuries, damages, or losses resulting from participation in training sessions or use of facilities and equipment.

I understand that results are not guaranteed and vary between individuals.

PHOTO & VIDEO CONSENT

■ YES — I allow MZ Fit Club to use photos/videos for marketing and social media purposes.

■ NO — I do not allow the use of my photos/videos.

CLIENT DECLARATION

I confirm that I have carefully read and fully understood this agreement.

I voluntarily agree to participate in training sessions at MZ Fit Club.

I accept full responsibility for my participation and health status.

Client Signature:

Trainer Signature:

Date:
