HUB International Limited
Insurance, Risk Management and Wealth Management Services

Shabira Manji at HUB International (TOS) Insurance Brokers
Tel: 604-899-3932, E-mail: shabira.manji@hubinternational.com

BCRPA Registered Personal Trainer Insurance Program

RELEASE AND INDEMNITY

Please Read Carefully

I, the applicant on behalf of myself, member of my family, my heirs, executors, administrators and assigns, hereby forever release, discharge and hold harmless:

TERRINA N. MASON and/or LIVING ACTIVE FITNESS CONSULTING

(name of registered/certified PERSONAL TRAINER)

and their representatives and agents for any injury, loss or damage to my person or property howsoever caused, arising out of or in connection with my taking part in personal training activities and notwithstanding that the same may have been contributed to or occasioned by the negligence of the above personal trainer or their representative(s) or agents. This statement includes but is not limited to participation in One-on-One Personal Training, Small Group Personal Training, Outdoor Nordic Pole Walking, Sport Specific Conditioning, Prenatal & Postpartum Fitness, FitPlay, Gliding Classes, Outdoor Boot Camp and any other activities participated in and/or offered by the above noted personal trainer.

In Witness thereof, I have hereunder set my hand this

_____day of_____, 20_____

_____ _____

Signature of Participant Print Name of Participant

Signature of Parent/Guardian (if participant under 19 years of age)_____

WITNESS

_____ _____

Signature of Witness Print Name of Witness

Address of Witness_____

Phone Number of Witness_____