

RELEASE OF LIABILITY

Waiver & Fee Agreement

I am fully aware that participating in any exercise program can be a potentially dangerous, hazardous activity. I am specifically aware of the potential dangers of participating in the Pinnacle Coaching Services, LLC training programs and/or events.

In consideration of my acceptance into the Pinnacle Coaching Services , LLC training program and/or events, I, the undersigned (parent or guardian if participant is under 18 years of age) intending to be legally bound, do hereby for myself, my heirs, executors, administrators, and assigns, assume any and all risks of participating in said training programs and events, and I hereby waive and release any and all rights and claims for damages I my have against Pinnacle Coaching Services, LLC, its representatives, successors, and assigns for any and all injuries, all such risks being known and appreciated by me. I hereby waive and release the above entities, their representatives, employees, successors, and assigns from any and all claims or liabilities of any kind arising out of my participation in said training programs and/or events, even though these claims and liabilities might arise out of the negligence or carelessness on the part of the persons named above. I attest and verify that I am physically fit and prepared for the Pinnacle Coaching Services, LLC training programs and/or events, and that a licensed medical doctor has verified my physical condition within the last six months.

I hereby assume full responsibility from any injury, including my death occurring while participating in, or as a result of, my participating in the , LLC training programs and/or events, and hereby release, waive, discharge and covenant not to sue Pinnacle Coaching Services , LLC and its successors, representatives, employees, assigns, or other participants in the Pinnacle Coaching Services, LLC training programs and/or events from any and all liability to me, my personal representatives, heirs, successors, and assigns for any loss or damage and claim or demands therefore on account of injury to me, including my death, whether caused by their negligence or carelessness in advising me while participating in the Pinnacle Coaching Services , LLC training programs and/or events.

I agree to pay Pinnacle Coaching Services, LLC prior to having services rendered in a timely manner for any services rendered or contracted during/for the period in which I am being coached, trained, helped or consulted based on the rate which has been agreed on by both parties. I agree to give Pinnacle Coaching Services and its officers a 30 day notice of cancellation of contracted services.

| Signed | Date |
|--------|------|
| - 8 | |

| (Signature of parent or guardian for minor) | |
|---|---------|
| Name | _ Coach |
| | |
| Address | |
| Start Date | |
| Telephone | |
| Email Address | |

PLEASE PRINT & FILL OUT CLEARLY AND COMPLETELY