



Consent Form

Exercise Objective: The purpose of an exercise program is to develop and maintain cardio-respiratory (aerobic) fitness, muscular strength and endurance, body composition, and flexibility. These recommendations to follow industry standards and should be conducted under the supervision of an MVP Professional.

Procedures: A structured exercise program based on individual needs (obtained fitness assessment information), interests, and/or physician’s recommendations will be given to each participant. Exercises may include aerobic-activities, calisthenics and weightlifting, and flexibility. All aerobic programs involve a warm-up, exercise at target heart rate, and cool-down components and follow the American College of Sports Medicine’s recommendations.

Potential Risks: All exercise programs/testing are designed to gradually increase workload on the cardio – respiratory and musculoskeletal systems in order to effect improvements. The body’s reactions to gradually increasing exercise activities cannot be predicted with complete accuracy. Unusual changes during or following an exercise session may occur. These may include muscular or joint injury, abnormal blood pressure, fainting, disorders of heartbeat, and/or very rare instances of heart attack or death.

Potential Benefits: Benefits obtained from a structured and regularly employed exercise program might include a more efficient cardio-respiratory system, an improved musculoskeletal system, a decrease in body fat, a decrease in blood fats, and improvement in psychological function, and a decrease in the risk of heart attack and other diseases.

Supervision: Your MVP Professional is not responsible for any injuries and/or damages that may occur during training. We are not doctors. If you have even the slightest concern about your physical condition or any exercise we suggest for you, please see an appropriate physician and make full disclosure to him or her and then clearly communicate any concerns he or she may have to your trainer. We have many different ways of addressing problems, if we are advised of them by you in advance.

Confidentiality: All participants exercise program information will be treated as privileged and confidential and will not be revealed to any person without expressed written consent. Obtained information, however, may be used for statistical or scientific purposes with right to privacy retained.

Injury and Freedom Consent: I have read the foregoing and I understand the objectives, procedures, potential risks and benefits, supervision issues, and confidentiality involved. Unless otherwise indicated under the ‘comments’ section below, I certify that I am in good health and have no condition that would limit/prohibit my participation in a structured exercise program. I understand that if there are any questions about the procedures or methods used during an exercise session, I should ask my MVP Professional. I realize that injury may result from improper exercise techniques or misuse of exercise equipment. I agree to be attentive to all instructions given to me. I assume responsibility for monitoring my own condition throughout the exercise program and should any unusual symptoms occur, I will cease my participation and inform my MVP Professional. I shall also notify my MVP Professional of any changes in my medical status. I consent to the administration of any immediate resuscitation measures deemed advisable to my MVP Professional or other qualified personnel.

I have read and understand the above information and voluntarily consent to participate in a structured exercise program. I realize that I am free to terminate the exercise program at any time.

Comments/Concerns: _____

Printed Name: _____

Signature: _____ Date: _____

Witness: _____ Date: _____