

Informed Consent and Liability Waiver for Clients of Kramer Health Coaching

Acknowledgement and Release of Liability

By electronically signing the form below, "I Accept":

I acknowledge that my participation in health coaching is expressly conditioned on my agreement to each of the terms of this document. I acknowledge and agree to the following:

1. Health coaching is a general term for the process of facilitating healthy and sustainable behavior change and transforming individual goals into action. Health coaching includes exploration of food, physical activity and lifestyle choices with an overall focus and journey towards healthy living.
2. I understand that Jeffrey Kramer, nor Kramer Health Coaching LLC make any guarantees regarding the results/outcomes of using Kramer Health Coaching LLC services and that outcomes are largely based on my own actions and potentially other unforeseeable variables. I also acknowledge that Jeffrey Kramer, nor Kramer Health Coaching LLC are able to predict how each individual's body will react to changes in diet, activity level or other lifestyle changes.
3. There is an inherent risk of injury when choosing to participate in any physical exercise, sport, wellness and/or recreational activity. My participation is voluntary in all respects and I assume all risks of injury and illness that may result from such participation in any individual activities.
4. Jeffrey Kramer (of Kramer Health Coaching LLC) is not a medical doctor or licensed dietician or nutritionist and that any advice given by Jeff Kramer is not meant to take the place of these professionals.
5. If I am under the care of a healthcare professional, have any medical condition, disease or illness or currently use prescription medications, I should discuss any dietary changes with my health care professional and should not discontinue any medications without first consulting my healthcare professional.
6. Health coaching is not intended to diagnose, treat or cure any disease. Health coaching is not a substitute for medical attention, examination, diagnosis or treatment.
7. As the participant, I recognize and acknowledge that there are risks of physical injury and I agree to assume the full risk of any injuries (including death), damages or loss which I may sustain as a result of participating in any and all activities arising out of, connected with or in any way associated with health coaching activities. I acknowledge that participation in these activities is voluntary.
8. In the event of any emergency, I authorize the Released Parties to secure from any licensed hospital, physician and/or medical personnel any treatment deemed necessary for my immediate care and agree that I will be responsible for payment of any and all medical services rendered.
9. I have been advised by Kramer Health Coaching LLC to consult with a physician before I undertake any physical exercise program or make any dietary changes. I certify that I am in good health and sufficient physical condition to properly participate in fitness

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activities and that I am knowledgeable about the rules of any activities and proper use of any equipment involved in the activities that I will participate in.

10. I hereby release, waive, acquit and forever discharge Kramer Health Coaching LLC from every claim, suit, action, demand or right to compensation for damages I may claim to have or the may arise as a result of the coaching relationship.

I have read and fully understand this Acknowledgement and Release of Liability set forth above, including the permission to secure medical treatment and the release of all claims, including claims for the negligence of the Released Parties.

I am 18 years old or older. I understand that my signed waiver will be retained in my client personnel file. This document is binding upon me and my heirs, children, wards, personal representatives and anyone else entitled to act on my behalf.

By electronically signing the form below, "I Accept"