



WAIVER

I acknowledge that I am participating in Pilates lessons, classes or workshops offered by Randi Stone and NYC Pilates LLC during which I will receive information about and instruction in Pilates, The Tupler Technique / Diastasis Rehab and MELT. I recognize in consideration of being permitted to participate in the Pilates lessons, classes or workshops, I agree to assume full responsibility for any risk, injuries or dangers, known or unknown, which I might incur as a result of participating in the program. In further consideration of being permitted to participate in the Pilates, The Tupler Technique / Diastasis Rehab and MELT classes and workshops, I knowingly, voluntarily and expressly waive any claim against Randi Stone, NYC Pilates LLC and their representative instructors for injury or danger that I may sustain as a result of participating in the program. I, my heir or legal representative forever release, waive and covenant not to sue Randi Stone, NYC Pilates LLC and their representative instructors for any injury or death caused by their negligence or other acts.

I understand that the information, coaching, advice and services provided by Randi Stone and her contractors is not intended to contradict or replace medical advice given by my physician.

I understand that I will be participating in physical exercise which can put me at risk for injury and/or death. I hereby state that I will be voluntarily participating in these activities and assume all risk that may result from these activities.

I have read the above release and waiver of liability and fully understand.

Signature _____ Date _____

Address: _____

Email: _____

Phone - H: _____ C: _____