

GENERAL RELEASE for use of FACILITY

I am giving this release to AZ SportsCenter: Physical Therapy & Conditioning, Inc. and its affiliates, and to all of their employees, agents, officers, and directors. This release is being given in connection with my use and participation of certain exercise equipment maintained by AZ SportsCenter: Physical Therapy & Conditioning, Inc. at its outpatient physical therapy clinic. As a condition of my use of such equipment, Lois Wolff, has required, and I have confirmed from my physician, that I do not have medical issues, which would disqualify me from participating in this type of program. Based on the foregoing, I, on behalf of myself and me heirs, beneficiaries and assigns, hereby release and discharge Lois Wolff and AZ SportsCenter: Physical Therapy & Conditioning, Inc. from ANY claims, causes of action, costs and /or expenses, known or unknown, which I may have or could claim to have against AZ SportsCenter: Physical Therapy & Conditioning, Inc. relating to my use of such equipment. I understand that this release includes, but is not limited to, all claims for personal injury, damages and other consequences whether currently anticipated or not, arising or resulting from my use of such equipment.

By signing below, I acknowledge that I have carefully read and fully understand the provisions of this release, and I am signing this release knowingly and voluntarily. I agree that this release constitutes the total and complete understanding between me, AZ SportsCenter: Physical Therapy & Conditioning, Inc., Lois Wolff and other employees relating to the subject matter covered by this release.

Name: _____ Date: _____

Signature (Guardian if minor): _____