

Reset2Fit, LLC 21 Day Challenge
Client Release, Waiver and Confidentiality Agreement

Participant's Release and Waiver:

By signing below, I _____, represent I am over the age of 18; and choose to voluntarily participate in the Reset2Fit 21 Day Challenge. **I agree that it is my responsibility to seek the advice or an examination by a physician prior to commencing any program for weight loss, fitness, nutrition, exercise or any combination of these activities.** If I chose not to obtain a physician's consent prior to beginning this challenge program, I hereby expressly acknowledge that I am doing so solely at my own risk.

I understand that any fitness instructional program may potentially pose risk of injury or adversely impact my health with skeletal/muscular, blood pressure, or fainting abnormalities; remote risk of heart attack, stroke; or other serious disability, including death. I understand that Reset2Fit, LLC will NOT be responsible for any medical costs associated with any injury I may sustain.

In consideration of my enrollment in the 21 Day Challenge, and this Agreement with Reset2Fit, LLC **I forever release, discharge, and hold harmless Necole Montford, as an individual, Reset2Fit, LLC, and its agents, heirs, assigns, contractors, and employees and waive any and all legal claims, demands, damages, rights or causes of action, present or future; including but not limited to alleged harm to person, injury, regardless of severity, death or damage to personal property, arising out of or connected in any way with my choice to participate in this or other programs offered by Reset2Fit, LLC.**

It is my express intent that this Agreement binds the members of my family (including, but not limited to, any spouse and children), and that it will be deemed as a full release, waiver, discharge and covenant not to sue by my relatives and my estate.

Participant's Confidentiality Requirements:

To protect the Confidential Information that will be disclosed during the Reset2Fit, LLC Fitness Challenge, the I agree to the following terms of confidentiality:

1. I will hold the Confidential Information received from Necole Montford and the Reset2Fit, LLC 21 Day Challenge program in strict confidence and will exercise a reasonable degree of care to prevent disclosure to others.
2. I will not reproduce the Confidential Information nor use this information commercially or for any purpose.
3. I understand that the matters discussed amongst participants in the 21 Day Challenge group sessions is confidential. I agree to respect the group as a "safe space" and will not disclose any confidential information shared with me by other Participants.
4. I will not disclose or divulge either directly or indirectly any Confidential Information received from Reset2Fit, LLC or exchanged to others without prior written permission.

Reset2Fit, LLC's Confidentiality Requirements:

Reset2Fit, LLC acknowledges that private information received from participants, such as age, weight, medical history, or personal circumstances may be disclosed for the purpose of customizing the 21 Day Challenge to suit the needs of each individual. Reset2Fit, LLC honors its professional and ethical obligation of confidentiality, and will not to disclose any such information without the participant's implicit consent.

Signing below signifies that the participant agrees to ALL terms and conditions of this Agreement stated above.

Print Participant Name: _____

Signature of Participant: _____ Date: _____