

# Gym Membership Waiver Form

**Member Name:** \_\_\_\_\_  
**Date of Birth:** \_\_\_\_\_  
**Email Address:** \_\_\_\_\_  
**Phone Number:** \_\_\_\_\_  
**Emergency Contact Name & Phone:** \_\_\_\_\_

## Waiver and Release of Liability

I, the undersigned, wish to voluntarily participate in activities, fitness classes, and usage of equipment and facilities at [Gym Name]. I acknowledge and fully understand that my participation involves inherent risks of injury, illness, or even death. I hereby assume all such risks, whether foreseen or unforeseen, and voluntarily release, waive, discharge, and covenant not to sue [Gym Name], its owners, agents, employees, and representatives from any liabilities, claims, or demands for personal injury, property damage, or wrongful death, whether caused by their negligence or otherwise.

## COVID-19 Acknowledgment and Agreement

- I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that I may be exposed to or infected by COVID-19 by attending the gym and engaging in its activities.
- I agree to comply with all posted guidelines, protocols, and procedures implemented by [Gym Name] to reduce the spread of COVID-19, including but not limited to mask-wearing, hand hygiene, social distancing, and equipment cleaning.
- I certify that I am not currently experiencing symptoms of COVID-19 (including but not limited to fever, cough, or shortness of breath), nor have I tested positive for COVID-19 in the past 14 days, nor have I been advised to quarantine by public health authorities.
- If I experience symptoms or test positive, I will promptly notify [Gym Name] and refrain from visiting the facilities until cleared by a physician.

## Medical Disclosure

I affirm that I am physically fit and capable of participating in gym activities. I agree to inform the gym in writing of any medical condition or limitation that may affect my participation, and to consult with my physician prior to commencing any exercise program.

## Agreement

I have read, understood, and agree to abide by all terms of this waiver. I recognize that by signing this document, I am waiving certain legal rights.

**Signature of Member:** \_\_\_\_\_  
**Date:** \_\_\_\_\_  
**If under 18, Signature of Parent/Guardian:** \_\_\_\_\_

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*This gym membership waiver form sample includes essential clauses to protect both the gym and its members, addressing general liability and specific risks related to COVID-19. It ensures participants acknowledge potential health risks and agree to follow safety protocols. Using this form helps maintain a safe environment while complying with legal requirements.*