## RICHMOND BARRE, LLC AGREEMENT OF RELEASE AND WAIVER OF LIABILITY

I,	, hereby agree to the following:	
during w fitness, and that may	I am participating in Barre Classes offered by Richmond Barre, LLC (hereinafter "Richmond Barre which I will receive information and instruction about the Richmond Barre method and technique, and health. I recognize that Richmond Barre Classes and other exercise fitness routines require physical be strenuous and may cause physical injury, and I am fully aware of and consent to the risks and therein.	as well as
condition	I realize there are special risks that could be associated with pregnancy, prior surgeries, injuries, are ons that may carry additional health concerns. I have discussed these with my personal physician, and his or her consent to participate in activities offered by Richmond Barre, LLC and/or Ashley Hudson.	and I have
Richmon and/or Ri prevent n	I understand that it is my responsibility to consult with a physician prior to, and regarding my particular conditions are Classes, as well as other exercise fitness routines, programs, or workshops offered by Ashl Richmond Barre LLC. I represent and warrant that I am physically fit and I have no medical condition t my full participation in Richmond Barre Classes. I understand that it is my responsibility to update a gard to any health condition changes that I experience in the future.	ey Hudson that would
	In consideration of being permitted to participate in Richmond Barre Classes, as well as exerc s, health programs, or workshops offered by Richmond Barre, LLC:	cise fitness
	a. I agree to assume full responsibility for any risks, injuries or damages, known or unknow which I might incur as a result of my participation in Richmond Barre Classes;	'n,
t	b. I, knowingly, voluntarily, and expressly waive any and all claims that I have, or may have the future, against Ashley Hudson and/or Richmond Barre, LLC for any injuries or damages that I ha sustained, or may sustain, as a result of participating in Richmond Barre Classes, exercise fitne routines, health programs, or workshops offered by Richmond Barre LLC;	ve
s t c	c. I agree not to instruct, train, teach, or provide services substantially similar to any of t services provided by Richmond Barre, LLC, including, but not limited to, the instruction, training, teaching of any barre method, barre style, ballet-barre, or barre related technique, movement, bor conditioning, exercises, or other fitness services in the City of Richmond and the Counties Chesterfield, Goochland, Hanover, and Henrico, Virginia, for a period of eighteen (18) months from the date of my last participation in any Richmond Barre Classes, exercise fitness routines, health program or workshops offered by Richmond Barre, LLC and/or Ashley Hudson.	or dy of he
Hudson a	I, my heirs, and/or legal representatives' forever release waive, discharge and covenant not to so and/or Richmond Barre, LLC for any injury or death caused in whole or in part by their actions or the actions or negligence of any other individual or entity.	
full right expenses	I understand that in the event I violate any provision of this Agreement, Richmond Barre, LLC sha ht to seek all remedies available to it by operation of law. I agree to reimburse Richmond Barre, LLC for es, or damages that it incurs as a result of any violation of any provision of this Agreement. This obliges all reasonable attorneys' fees and costs.	or all costs,
	read the above release and waiver of liability and fully understand its contents. I voluntarily agree to the ons stated above. This agreement shall be governed by the laws of the Commonwealth of Virginia.	terms and
SIGNAT	ATURE OF PARTICIPANT DATE	

SIGNATURE OF WITNESS