



Bodies for Birth

Healthy Moms for Healthy Babies

Bodies for Birth Activity Release Agreement

I am voluntarily participating in an athletic or physical activity with Bodies for Birth with full knowledge, understanding and appreciation of the risks of injury inherent in any physical exercise, physical activity, or athletic activity and expressly assume all risks of injury and even death, which could occur by reason of my participation. I release Bodies for Birth from any liability and agree not to sue Bodies for Birth with respect to any cause of action for bodily injury, property damage or death occurring to me as a result of my participation in the activity.

I am at least six weeks postpartum following an uncomplicated vaginal delivery or at least eight weeks postpartum following a cesarean delivery and/or have obtained clearance to exercise from my OB/Gyn or Midwife. I am aware of the risks of exercising and choose to exercise at my own risk.

Participant Printed Name _____

Participant Signature _____

Date _____

Witness Printed Name _____

Witness Signature _____

Date _____

