

Trail-Ready Coaching LLC



Informed Consent for Participation in Movement & Performance Coaching

1. PURPOSE AND EXPLANATION OF PROCEDURE

I hereby consent to voluntarily engage in Movement & Performance Coaching. I also give consent to be placed in personal movement and training activities which are recommended to me for improvement of my health and fitness. The levels of movement, activity, and exercise I perform will be based upon my cardiorespiratory and neuromuscular fitness. I state that I am physically sound and suffering from no condition, impairment, disease, injury, or other illness that would prevent me from participation in Movement & Performance Coaching.

I will be given recommendations regarding the amount and kind of movements, exercises, and activities I should do. My movement & performance coach will provide leadership to direct my activities, monitor my performance, and otherwise evaluate my effort. If I am taking prescribed medications or have any underlying health conditions that would place me at increased risk of injury or bodily harm while receiving coaching services I have already informed my coach and further agree to inform them promptly if any of these medications or conditions should change. I will be given the opportunity for periodic assessment and evaluation at regular intervals while receiving coaching services.

I have been informed that while receiving coaching services, I will be asked to complete physical activities and movements unless symptoms such as fatigue, shortness of breath, chest discomfort, severe pain, dizziness, or other adverse symptoms occur. At this point, I have been advised that it is my complete right to decrease or stop movements and activities at my discretion. I understand it is my obligation to inform my coach of any symptoms should any develop, and contact my healthcare provider to address these symptoms.

I understand that during the performance of movements and activities, I will receive periodic monitoring to assess my progress. I also understand that my coach may reduce or stop the session when any of these findings so indicate that this should be done for my safety and benefit.

I understand that the services, materials, and content provided by Trail-Ready Coaching LLC including emails, messages, coaching sessions, consultations, and training plans are for general health information only and are not intended to be a substitute for professional medical advice, diagnosis, or treatment. Coaching services are NOT a substitute for physical therapy or other forms of medical treatment.

2. RISKS

It is my understanding and I have been informed that there exists the remote possibility during movements and activities of adverse changes including, but not limited to, abnormal blood pressure, fainting, dizziness, disorders of heart rhythm, and in very rare instances heart attack, stroke, or even death. I further understand and I have been informed that there exists the risk of bodily injury including, but not limited to, injuries to the muscles, ligaments, tendons, and joints of the body. I fully understand the risks associated with movements and activities, including the risk of bodily injury, heart attack, stroke or even death, but knowing these risks, it is my desire to participate as herein indicated.

3. CONFIDENTIALITY AND USE OF INFORMATION

I have been informed that the information which is obtained with coaching services will be treated as privileged and confidential and will consequently not be released or revealed to any person unless given permission by myself to release that information for receiving treatment by a healthcare provider, participate in research, or to be used for statistical purposes. Any other information obtained will be used only by my coach to evaluate my health status or needs.

4. INQUIRIES AND FREEDOM OF CONSENT

I have been given an opportunity to ask questions as to the procedures. I have read this informed consent form, fully understand its terms, understand that I have given up substantial rights by signing it, and sign it freely and voluntarily, without inducement.

Participant's Signature

Participant's Name (Printed)

Date: _____