



## WAIVER OF LIABILITY AND INFORMED CONSENT RELEASE

### Cancellation policy:

I understand that there is a 24-hour notice required for cancelling or rescheduling all Muscle Activation Techniques sessions. I understand that I will be charged the full amount per session for appointments that are missed, or rescheduled, within the 24-hour time frame.

### Muscle Activation Techniques (MAT) sessions:

I understand that I have enrolled in a program of Muscle Activation Techniques offered by Amber Baron, MAT Certified Specialist. I have been advised and understand that participating in MAT based biomechanical treatments and isometric exercises carry with it some unavoidable risks, including injury or provoking symptoms related to preexisting or present conditions such as illness, disability, trauma or surgery. I understand that though MAT has many benefits, MAT Certified Specialists do not carry a license to diagnose or make assessments regarding medical conditions of any kind.

I also understand that medical evaluation is advisable before beginning any form of therapy or physical exercise. I have and will continue to keep Amber Baron fully informed of any physical condition or disability, which would affect my participation or safety in Muscle Activation Techniques sessions.

I assume all risks of my participation in Muscle Activation Techniques sessions. I waive any claim, which I might otherwise bring against Amber Baron, of injuries occurred from or in relation to participation in Muscle Activation Techniques sessions.

Clients Name/Signature \_\_\_\_\_ Date \_\_\_\_\_  
Responsible Party (for children under 18) \_\_\_\_\_ Date \_\_\_\_\_