

# **MADE WELL SERVICES**

## **LIABILITY RELEASE**

Printed Name:

Date:

I am voluntarily participating in the mentorship program and/or the MW One Program conducted with Jamie Hoos, an independent contractor. I recognize that the program addresses physical, mental, emotional and spiritual health and that any specific guidance given are suggestions and I am fully aware of the risks and hazards involved in acting upon those suggestions. I understand that it is up to my personal judgement for the choices I make within this program. I understand that it is my responsibility to consult with a physician prior to and regarding any suggestions given in the above mentioned services. I represent and warrant that I have no medical condition that would prevent my participation in the program. I agree to assume full responsibility for any risks, injuries or damage know or unknown which I might incur as a result of participating in the program. I knowingly, voluntarily and expressly waive any claim I may have against Made Well Christian Mentoring or my Christian Health Mentor for injury or damages that I may sustain as a result of participating in the program. I release waive, discharge and covenant not to sue Made Well Christian Mentoring for any injury or situation caused by their negligence or other acts. I have read the above waiver and release of liability and fully understand its contents. I voluntarily agree to the terms and conditions stated above.

**Full Signature & Date**