



BOWEN
Physical Therapy Services Inc.

Waiver Form:

I, _____, the undersigned, will be paying for an assessment on prevention of running injuries by Tierney Bowen in which I will be assessed for muscle strength, flexibility and balance from the low back down to the foot. I will also have to run on the treadmill with shoes on as well with shoes off. I will not hold Tierney Bowen, Lifemark Physiotherapy-Southland or the Southland Leisure Centre accountable for any injuries that may occur during the assessment.

In addition, I agree that there is no guarantee of not getting injured and that I may still get injured from running as there are confounding factors that contribute to an injury. Furthermore, I agree that I can have a risk of injury that may not get picked up on assessment as it may only be diagnosed on other investigations such as MRI, bone scan, etc.

If I decide to run in racers, I understand that during the transition stage from runners to racers that I will be sore after runs until my body adapts. I do understand that I am to progress slowly into the racers. I will not hold Tierney Bowen accountable for any discomfort or injury that may occur with switching to the racers.

SIGNATURE

DATE