PsycoFit

Participant acknowledgment

Four-Week Gym Strength Program

Please read and sign before receiving your program. Return the signed form privately to Esther using the contact link provided on the PsycoFit website.

What I am purchasing

I understand this is a general, self-directed exercise program. Esther will not be supervising my workouts or assessing my individual fitness, technique, or equipment setup.

My participation

I understand strength training involves risks, including injury. I will choose weights and movements appropriate for me, follow equipment instructions, and ask qualified gym staff for help with unfamiliar equipment. I will stop if I feel pain, dizziness, or otherwise unwell. If I am unsure whether the program is suitable for me, I will seek individual advice before starting.

My acknowledgment

By signing, I confirm that I have read and understood this information and choose to participate. This acknowledgment does not limit my statutory rights.

Participant name _____

Signature _____

Date _____

PayPal payment reference _____