

**THE HOT ROOM @ STUDIO BE
RELEASE OF LIABILITY, WAIVER CLAIMS,
ASSUMPTION OF RISKS AND INDEMNITY AGREEMENT.**

**BY SIGNING THIS DOCUMENT, YOU WILL WAIVE CERTAIN LEGAL RIGHTS,
INCLUDING THE RIGHT TO SUE. PLEASE READ THIS CONTRACT CAREFULLY.**

ASSUMPTION OF RISKS:

Seikatsu Ent Inc., DBA (THE HOT ROOM @ STUDIO BE) provides fitness facilities and equipment (the "Facilities"), group fitness classes including HIIT, Strength Training, and Yoga classes (the "Services"). I am aware that using the Facilities or participating in the Services provided by THE HOT ROOM @ STUDIO BE exposes me to many inherent risks, dangers and hazards, including but not limited to: COVID-19, loss of consciousness, slips and falls, shock, stress, and collisions with other participants or instructors. By using the Facilities or the Services of THE HOT ROOM @ STUDIO BE, I freely accept and fully assume all inherent risks, dangers and hazards of the Facilities and Services, including but not limited to the possibility of sickness, personal injury, death, property damage or loss resulting therefrom, whether to myself or that I may cause to others.

RELEASE OF LIABILITY, WAIVER OF CLAIMS AND INDEMNITY AGREEMENT:

In consideration of THE HOT ROOM @ STUDIO BE permitting me to use the Facilities and participate in the Services and for other good and valuable consideration, the receipt and sufficiency of which is acknowledged, I HEREBY IRREVOCABLY AGREE AS FOLLOWS:

1. TO WAIVE ANY AND ALL CLAIMS that I now have, or may have in the future, against The Hot Room @ Studio be and its affiliates, directors, employees, independent contractors, agents and representatives (hereinafter collectively referred to as the "Releasees") for any loss, liability, claim of bodily injury, death or property damage, expenses or costs that I may suffer, or that my next of kin may suffer due to my use of THE HOT ROOM @ STUDIO BE Facilities or Services.

2. TO FOREVER RELEASE, REMISE AND DISCHARGE THE RELEASEES jointly and severally from any and all actions, causes of actions, claims and demands for damage, loss or injury, suits, indemnity, expenses, interest, costs and claims of any and every kind and nature whatsoever, at law or in equity, which against The Hot Room @ Studio be, I ever had, now have or can hereafter have by reasons of or existing out of any causes whatsoever, INCLUDING NEGLIGENCE, BREACH OF CONTRACT, BREACH OF STATUTORY OR OTHER DUTY OF CARE, AND/OR BREACH OF THE OCCUPIER'S LIABILITY ACT, RSBC 1996, c.337 ON THE PART OF THE RELEASEES, INCLUDING THE FAILURE OF THE RELEASEES TO SAFEGUARD OR PROTECT ME FROM THE RISKS, DANGERS AND HAZARDS ASSOCIATED WITH MY USE OF THE FACILITIES AND THE SERVICES.

3. TO HOLD HARMLESS AND INDEMNIFY THE RELEASEES from any and all liability for any property damage or personal injury of any nature to any third party, resulting from my use of or presence on the Facilities or participation in the Services.

4. I acknowledge that I have been urged to avoid bringing valuables into the studio and that THE HOT ROOM @ STUDIO BE shall not be liable for the loss of, theft of, or damage to my personal property, including items left in bathrooms, change rooms, or anywhere else on the premises. I acknowledge that no portion of any fees paid by me is in consideration for the safeguarding of valuables.

5. I acknowledge that if I am sick, feeling ill, or experiencing any symptoms of COVID-19 including but not limited to sore throat, coughing, sneezing, fever, headache, and loss of taste that CBC requires me to stay home and self-isolate for 14-days if applicable. I also acknowledge that if I am considered a member of a vulnerable population or am in contact with someone who is a member of a vulnerable population, that I have been advised to stay home.

6. I am 19 years of age or older and in proper physical condition to use the Facilities and participate in the Services and am aware that use and participation could, in some circumstances, result in physical injury, disability or death. I also acknowledge that if I am not 19 years of age, my parent/guardian will co-sign a waiver with me. If I am 14 years of age or younger, my parent/guardian will co-sign the waiver and remain on-site for the duration of my use of the Facilities and participation in the Services.

7. I give my permission for the free use of my name and image in broadcast, telecast or other media account of any THE HOT ROOM @ STUDIO BE Services and for the promotional purposes of THE HOT ROOM @ STUDIO BE.

8. That this Agreement shall be effective and binding upon any heirs, next of kin, executors, administrators and assigns in the event of my death or incapacity. I have read and understood this Agreement prior to signing it and understand that by signing this Agreement, I am waiving certain legal rights which I or any of my heirs, next of kin, executors, administrators and assigns may have against the Releasees.

Signed this _____ day of _____, 20_____.

Witness's Signature

Participant's Signature

Print Witness's Name Clearly

Print Participant's Name Clearly

Print Name of Guardian Clearly
years of age

Signature of Guardian if Participant under 19