

Health & Wellness Services Waiver

Participant Agreement, Release, and Assumption of Risk

1. Assumption of Risk and Waiver of Liability:

I, the undersigned, acknowledge that I am voluntarily participating in the health and wellness services provided by Doctor Jon Go LLC, which may include, but are not limited to, courses, educational materials, products, coaching, and other health and fitness services. I understand that these services may include activities involving physical exertion and dietary recommendations, both of which carry inherent risks, including but not limited to personal injury, illness, or adverse medical conditions.

By signing this waiver, I confirm that I have consulted with my primary healthcare provider before engaging in any activities or making any lifestyle, diet, or exercise changes discussed through Doctor Jon Go LLC. I understand that although Doctor Jon Go LLC is operated by a licensed physician, the services provided are educational and non-clinical in nature and do not provide personalized medical care. I understand that Doctor Jon Go LLC does not provide services as a registered dietitian, licensed nutritionist, certified personal trainer, or weight loss medical practice. Doctor Jon Go LLC does not assume responsibility for any health complications arising from any participation in any program, product, or service offered by Doctor Jon Go LLC.

2. No Medical Advice – Educational Purposes Only

I understand that the services, products, materials and information provided by Doctor Jon Go LLC are designed for general health, fitness, and wellness education. **These services are not intended to diagnose, treat, cure, or prevent any medical conditions and should not be construed as medical advice. These services do not replace or substitute professional medical care.** The Provider recommends that the Client consult with their primary healthcare provider before participating in any programs, services, or products offered by Doctor Jon Go LLC. I acknowledge that I have been advised to consult my healthcare provider before making any health or lifestyle changes.

3. No Physician-Patient Relationship

The Client acknowledges that, although Doctor Jon Go LLC is operated by a licensed physician, **no physician-patient relationship is established through participation in the wellness services provided by Doctor Jon Go LLC.** The Provider offers health and wellness services solely for educational purposes under this Agreement, which are separate from any medical treatment the Client may receive in a clinical or healthcare setting. The Client should not interpret any information or guidance provided as

personalized medical advice.

4. Waiver of Liability and Hold Harmless:

In consideration of my participation, I **hereby** agree to release, waive, and discharge Doctor Jon Go LLC, including its owners, agents, employees, or contractors, from any **claims, demands, losses, costs, expenses, obligations, liabilities, damages, recoveries, and deficiencies, including interest, penalties, attorney's fees, and/or legal costs, fees and expenses** arising from injuries, health conditions, or damages **resulting to me from my participation in the services offered by Doctor Jon Go LLC.**

5. No Guarantees:

I understand that Doctor Jon Go LLC makes no guarantees about specific results or outcomes from any of its services, products, or courses. I am aware that my success depends on my efforts and personal commitment, and no warranties or assurances are provided regarding fitness, weight loss, or health improvement.

6. Governing Law and Venue:

This Agreement shall be governed by and construed in accordance with the laws of the State of California. Any legal action or proceeding arising under this Agreement shall be brought exclusively in the courts located in Los Angeles County, California.

7. Attorney's Fees:

In the event of any litigation or dispute arising out of or relating to this Agreement, the prevailing party shall be entitled to recover its reasonable attorney's fees and legal costs.

8. Informed Consent:

I confirm that I have read and understood this waiver. I am physically capable of participating in these services and have sought medical clearance as necessary. By signing below or by electronic signature, I voluntarily agree to assume all risks associated with any services, courses, products, or materials offered by Doctor Jon Go LLC. If I access or use any of these services, courses, products, or materials, I confirm my acceptance of this waiver.