

Total Human Performance LLC

Medical Release Form

Date: _____

Dear Doctor: _____ (print doctor name)

Your patient (your name) _____ (date of birth) _____ wishes to start/continue a physical fitness exercise program.

The Functional Fitness Class is a non-impact 45 minute exercise class for adults age 55 and beyond that is held one day per week. The class is designed to assist with building and maintaining muscle strength, better movement, and balance which are all necessary for daily activities. Participants are taught proper exercise technique and exercises are modified as needed.

Class activities and benefits include:

- resistance training to build and maintain muscle strength using dumbbells, resistance bands, and bodyweight,
- boosting self-confidence,
- balance and mobility exercises,
- enhancing ability to perform daily functional activities such as household chores, recreational activities, playing with kids and grand-kids,
- reducing risk of injury,
- moving and feeling better.

YES, the above mentioned patient, in my opinion, is able to clearly follow and retain directions, is physically and mentally healthy, and is also able to participate in weight/resistance activity.

NO, the above mentioned patient has not been medically cleared to participate in the Functional Fitness Class.

Signed: _____ Date: _____ Phone: _____

If you have any questions or concerns, please feel free to contact me at 603-402-9196 or by email at kevin@totalhumanperformance.com

Thank you.

Sincerely,

Kevin R. Burgess, CSCS, ACE-CPT, ACE-CHC, Pn1
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