

Whole Body Vibration Consent

Full Name _____

Please be advised that the **K-1 Platinum Whole Body Vibration Machine** is being used for the purpose of exercise and other health benefits. Read and follow all instructions and warnings and obtain proper instruction prior to using the K-1 Machine. If you have any of the conditions listed below, please consult a physician before using. This device may not be suitable for everyone. Strong vibration affecting the neck and head can occur when using positions other than standing. Consulting a physician for approval is recommended. Misuse of this machine could result in serious injury. Keep children under age 12 away from this machine. User weight must not exceed 325 pounds. Stop exercising if you feel pain, faint, dizzy, or short of breath.

If you have any of the following diagnosed conditions, please place a check mark and discuss with your Doctor:

- Acute Hernia, Discopathy or Spondylosis
- Acute Thrombosis
- Artificial Joints (recent)
- Hip, Knee or shoulder implants
- Epilepsy
- Head Injuries, Known Neurological Conditions
- Pacemaker and Implantable Cardioverter Defibrillator
- Poor Samato Sensory Receptor on Feet Planar Surfaces
- Pregnancy
- Pulmonary Embolism
- Recent Wounds from an Operation or Surgery
- Recently Placed IUD's, Metal Pins, or Plates
- Retinal Detachment, Known Retinal Conditions
- Severe Cardiovascular Disease or Conditions
- Severe Migraines
- Tumors (cancerous)
- Severe Diabetes

If you checked any of the above conditions, please explain:

I understand that I may be able to use the K-1 Whole Body Vibration Device even though I have check marked any of the above conditions. I further understand that I use the K-1 Whole Body Vibration Device at my own risk.

Signature

Date