

The Yoga Connection, LLC

Yoga Instruction Release

I represent that I am the parent or legal guardian of the Participant(s) named below, or I have obtained permission from the parent/legal guardian of the participant(s) named below to execute this agreement on their behalf. I agree that the participant(s) named below and I shall comply with all stated and customary terms, posted safety signs, rules, and verbal instructions as conditions for participation in the program(s) offered by The Yoga Connection, LLC.

I _____ (print Name) understand that yoga includes physical movements and, as is the case with any physical activity, the risk of injury, even serious or disabling, is always present and cannot be entirely eliminated. I, on behalf of myself and the participant(s) named below, knowingly and freely assumed all such risks, both known and unknown, including those that may arise out of the negligence of other participants.

Yoga is not a substitute for medical attention, examination, diagnosis or treatment. Yoga is not recommended and is not safe under certain medical conditions. I affirm that I, as the parent, legal guardian, or individual vested with the authority to enter into this agreement on behalf of the parent or legal guardian of the participant(s) named below am responsible to decide whether the participant(s) practice(s) yoga. I hereby agree for myself and the participant(s) named below to irrevocably release and waive any and all claims that I, or they, have now or hereafter may have against The Yoga Connection, LLC.

Participant Name: _____

Participant Name: _____

Signature of Parent/Guardian

Date

Address **State** **Zip**

Emergency Contact Phone Number

Email Address (Optional)*not to be used for solicitation or sold

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