

## Agreement of Release and Waiver of Liability

First Name:	Phone number:
Last Name:	Email address:(for sales & newsletters)
Address:	Birthday (MM/DD/YYYY):
City:	How did you hear about us?
Postal Code:	Emergency Contact:
	Emergency Contact Tel#:
Primary reason for visiting us:	
Please list any injuries, surgeries, ailm	nents, medications or medical conditions that the instructors should
You are aware that there are risks associated with participaccept and fully assume all responsibility for all risks, and as a result of your participation in fitness activities. You  to waive all claims, known or unknown, that you agents, employees, volunteers, business operator  that The Yoga Loft is not liable or responsible for to release and forever discharge The Yoga Loft from participation in fitness activities due to any cause careful person would use under similar circumstated Yoga Loft; and  to be liable for and to hold harmless and indemnit costs on a solicitor and own client basis, and liab fitness activities.  It is my responsibility to ascertain there is no me Loft.  As consideration for being allowed to participate workshops and retreats), I release The Yoga Loft all claims arising out of my participation.	from all liability for any personal injury, death, property damage or loss resulting from your e, including but not limited to negligence (failure to use such care as a reasonably prudent and ances), breach of any duty imposed by law, breach of contract or mistake in error of judgment of Th ify The Yoga Loft from all actions, proceedings, claims, damages, costs demands, including court illities of whatsoever nature or kind arising out of or in any way connected with your participation i dical reason to prevent my participation in the practice of any type of program offered at the Yoga in any classes or activities at The Yoga Loft or off-premise locations (to include, but not limited to the tits owners, instructors, or any other person or entity in any way involved therewith from any and
contents.	iver of liability is a legal contract and that, by reading it carefully, I have complete knowledge of its
	an exercise or fitness program, and prior to using the Facility.
I have carefully read and fully understand and over the age of 18.	l agree with the above legal contract and sign it of my own free will and I am
Participant signature  If the participant is under 18 years of age: As legal guardian I consent to the above cond  Signature of parent / guardian	
Signature of parent / guardian	Date: