



Yoga Therapy Waiver of Liability

1. I recognize that yoga involves physical exertion, which may be strenuous and may cause physical injury. I understand that I must judge my own capabilities with respect to practicing yoga. By my participation in yoga classes/private sessions, I agree to assume full responsibility for any risks, injuries or damages, known or unknown, which I might incur in such practice.

2. I understand that it is my responsibility to consult with a physician prior to and regarding my participation in yoga. I represent and warrant that I am physically fit and have no medical condition which would prevent my full participation in private yoga therapy sessions. I acknowledge that it is my responsibility to inform my teacher of any injury or other condition that might affect my ability to participate, and to inform her immediately if an injury occurs during a session.

3. I, my heirs or representative forever release, waive, discharge, and covenant not to sue my teacher for any injury caused by her negligence or other acts. I knowingly, voluntarily, and expressly waive any claim I may have against my teacher for injuries or damages that I may sustain as a result of participating in a yoga class/session.

4. I understand that my teacher may physically adjust me for proper alignment or to help me experience a pose better. If I feel uncomfortable, it is my responsibility to let my teacher know that I do not want to be touched.

5. In the event that this waiver needs to be produced, a copy of the original will suffice.

6. I have carefully read this waiver and release, fully understand, and voluntarily agree to the above.

SIGNATURE OF PARTICIPANT

DATE