

Waiver & New Student Intake Form
Yoga Instructor Liability Waiver & Participant Form

Happy Hart Yoga LLC

Participant Name:

Full Address:

Contact Information (email and phone #):

Emergency Medical Contact Name:

Emergency Contact Phone:

Medical History (please list any health impairments, surgeries, injuries, etc):

Yoga History (If new to yoga, what are your goals, concerns?):

How did you hear about *Happy Hart Yoga*?

Would you like to receive emails from *Happy Hart Yoga* regarding information for future classes, workshops, specials, events, etc.?

I _____ (print name) recognize that participating in a yoga class requires physical exertion and movements, as well as an opportunity for stress reduction and relaxation, and as is the case with any physical movement, the risk of injury sometimes serious, is always present and cannot be eliminated. I further understand my own personal, physical limitations, and I am self-aware enough to listen to my body, modify the postures as necessary, and stop physical activity before I become injured or ill.

Yoga is not a substitute for medical examination, diagnosis, or treatment. I understand that yoga is not safe or recommended for certain medical conditions. I alone affirm that I am ultimately responsible to decide whether or not to practice yoga.

I, my heirs, or legal representatives, forever release and hold harmless *Happy Hart Yoga* from any and all liability and responsibility from injury, illness, accident, that are sustained now or in the future that result from my participation in yoga.

I further understand it is my responsibility to consult with a physician prior to participating in yoga. In consideration of being permitted to participate in yoga classes, I agree to waive any claim I might have against *Happy Hart Yoga*.

I have read the above release and waiver and fully understand its contents. I voluntarily agree and consent to its terms and conditions stated above.

Signature:

Date:

***If under 18 years of age**

As legal guardian of _____ I consent to the above terms & conditions.

Signature:

Date: