

Mind Soma Health LLC Yoga School & Wellness Center Release and Waiver of Liability

First Name:

Last Name:

Street Address:

City:

State:

Zip Code:

Phone Number:

Email:

Date of Birth:

Allergies/sensitivities:

Main concerns/purpose for visit:

I, _____, hereby agree to the following:

1. I am participating in yoga classes, health programs, workshops and/or other wellness, bodywork, therapy, exercise and healing arts activities (collectively, the "Activities") offered by Mind Soma Health LLC (the "School"). The Activities may be offered in the physical location of the School or offered online by videos, television, podcasts, apps, or other digital media or platforms. All of such offerings, either physical or online, shall be considered "Activities."
2. I recognize that I must be in adequate physical and mental health to participate in the Activities. I understand that the Activities may require intense physical exertion, and I represent and warrant that I am physically fit enough to participate, and I have no medical condition which would prevent my full participation in the Activities. I recognize that the Activities may cause or aggravate a physical injury or medical condition. I understand that it is my responsibility to consult with a physician before my participation in the Activities. If I have done so, I have taken the physician's advice. I understand that the School reserves the right to refuse my participation in any Activity on medical, fitness, or any other grounds.
3. I am aware that my participation in the Activities could result in high blood pressure, fainting, heartbeat disorders, physical injury, heart attack, or stroke and may aggravate pre-existing injuries. I understand that I could experience muscle, back, neck, and other injuries as a result of my participation in the Activities. I understand my physical limitations and I am sufficiently self-aware to stop or modify my participation in any Activity before I become injured or aggravate a pre existing injury.
4. In consideration of being permitted to participate in the Activities, I agree to assume full responsibility for any risks, injuries or damages, known or unknown, which I might incur as a result of participating in the Activities at the School, including those which may result from the negligence of the School.
5. In further consideration of being permitted to participate in the Activities, I knowingly, voluntarily and expressly waive any "Claim" (as defined below) I may

have against the School, its owners, managers, teachers, instructors, workshop presenters, employees, independent contractors and staff (each, a "Released Party") that I may sustain as a result of participating in the Activities at the School even if the Claim arises from the negligence of any Released Party or anyone else.

6. I, my heirs or legal representatives forever release, waive, discharge, and covenant not to sue any Released Party for any Claim caused by any negligence or other acts of a Released Party.
7. I hereby understand that the School from time to time may photograph, video, or otherwise record classes or events occurring at the School and place such photographs and videos on its Website or social media platform. I hereby consent to the use of my image that may appear in any such photograph or video.
8. This agreement shall be construed in accordance with, and governed by, the laws of the State of _____ and that all actions, suits, claims and proceedings relating to this agreement shall be brought in a court of competent jurisdiction located in _____. In case any provision of this agreement shall be held invalid, illegal, or unenforceable, it shall not affect any other provision of this agreement, and this agreement shall be construed as if such provision had never been contained herein.

I acknowledge that I have carefully read this agreement and fully understand its contents. I voluntarily and knowingly agree to the terms and conditions stated herein. I am aware that by signing this agreement, I am giving up substantial rights, including my right to sue and certain legal rights my heirs, next of kin, executors, administrators, and assigns may have against any Released Party.

Signature of participant: _____ Date:

If participant is under 18:

As legal guardian of _____, I consent to the above
Release and Waiver of Liability

Signature of parent/guardian: _____ Date:
