

Moksha Yoga Edmonton

Agreement of Release and Waiver of Liability

How did you hear about the Moksha Yoga Edmonton Studio? _____
(of general interest to us!)

What is your email address? _____
(we send you one e-newsletter a month and will never share your email with third parties)

When is your birthday? _____
(because you get a free yoga class on your birthday!)

Are there any injuries, ailments, or medications that the instructor should know about?

I, (print name) _____, agree to the following:

1. That the instruction offered by Moksha Yoga Edmonton is limited to that of instruction in basic yoga and health.
2. That even with clear instruction, there is a possibility of injury, and that it is my responsibility to consult a physician regarding my ability to participate before coming to Moksha Yoga Edmonton.
3. I attest that I have no psychological, medical or emotional condition that would prevent me from safe participation in a Hot Yoga class.
4. I release and discharge Moksha Yoga Edmonton, its directors, and the Moksha Yoga instructors from any and all liability, claim, demand or action that I may have resulting from injury, death or damages arising from my participation in the yoga class or at that yoga studio, including loss that may be caused by the negligence of the released party.
5. I release and discharge Moksha Yoga Edmonton, its directors and its instructors from any and all liability, claim, demand or action that I may have related to the loss, theft or damage of any of my personal property from the Moksha Yoga Edmonton premises.
6. I recognize that this agreement of release and waiver of liability is a legal contract and that, by reading it carefully, I have complete knowledge of its contents.

I have read this agreement and fully understand its content and meaning, and sign it of my own free will and I am over the age of 18.

Participant signature: _____ Date: _____ Phone #: _____

- ❖ If the participant is between the ages of **14-18 years**: As a legal guardian of:
_____, I consent to the above conditions and terms.

Signature of parent/guardian: _____ Date: _____