Garden Street Yoga Liability Release and Student Information

I,_____ have enrolled to participate in Yoga classes at Garden Street Yoga.I acknowledge that Yoga classes through Garden Street Yoga provide training for physical balance and well-being. At times the program may involve strenuous physical exertion. I agree that I have either consulted my physician, other health care provider or made my own determination that I am capable of participating in this program. I have informed my teacher of this and have not otherwise relied on her opinion of my fitness for this program.

I also acknowledge that my participation in this program may cause me to experience a degree of physical change and from time to time some pain or discomfort. If that occurs I agree to promptly report those sensations to my teacher and I agree that she may rely on me to promptly and accurately report these occurrences to her.

I further agree to wear comfortable clothing that allows my teacher to see my alignment clearly and give corrections. Leggings and fitted tops are ideal. Sweat-pants (not too baggy), mid-thigh shorts (no running shorts), Yoga pants and capris and T-shirts (not too loose) are acceptable.

By entering into this agreement I acknowledge that that this program involves progressively strenuous exertion. I acknowledge that there are inherent risks to me in following and performing this program. I specifically agree to release and hold harmless my teacher, her agents and assigns from any and all liability known or unknown to me and arising out of my and her performance of the activities performed under this agreement. My release shall extend to and include her ordinary negligence if such shall occur. This is the entire agreement between my teacher and myself, no other agreement exists and this may be changed only if the change is in writing and is signed by both of us.

Date:

Teacher's Signature

Student' Signature

Student Information

NAME: DATE:

ADDRESS:

CITY, STATE. ZIP:

E-MAIL:

HOME PHONE:
WORK PHONE:
CELL PHONE:

PRIOR EXERCISE

MEDICAL and PHYSICAL HISTORY (Please include any accidents, injuries, physical limitations, medical conditions or special medications):

OTHER COMMENTS & / or REASONS FOR COMING TO YOGA:

REFERED BY: