

First Name _____ M.I. _____ Last Name _____

Address _____

City, State, Zip _____

Phone _____ Email _____

Sign up for E-Mail Newsletter? YES NO

Emergency Contact Name _____ Phone _____

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 and/or workshops taught at Revolver Yoga Studio, I agree to assume full responsibility for any risks, injuries or damages, known or unknown, that 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 yoga classes. I acknowledge that it is my responsibility to inform the instructor when I begin a class of any injury or other condition that might affect my ability to participate, and to inform the instructor immediately if an injury occurs during class.
3. I understand that yoga involves non-sexual physical contact between student and teacher in the form of physical adjustments. I understand that any form of physical contact between teacher and student is non-sexual in nature and occurs as a preventative measure against injury.
4. I, my heirs or representatives release, waive, discharge, and covenant not to sue Revolver Yoga LLC, Courtney Morgan and their officers, employees and agents for any injury caused by their negligence or other acts. I knowingly, voluntarily and expressly waive any claim I may have against Revolver Yoga Studio for injuries or damages that I may sustain as a result of participating in its yoga classes.
5. As a student of Revolver Yoga Studio, I understand and comply with the following statement (please initial):

____ Racial, sexual, religious and political harassment will not be tolerated within the studio space and will result in my being asked to leave and/or suspend my membership to Revolver Yoga Studio for a length of time determined by the owner and contracted teachers.
6. I have carefully read this waiver and release, fully understand and voluntarily agree to the above statements:

Participant Signature

Date

Guardian Signature (if under 18)

Guardian Name (if under 18)