

YOGA WAIVER AND RELEASE OF LIABILITY FORM

Please sign and mail this form to:
Karuna & Paul Erickson
RR#3 S37 C8
Nelson, BC Canada V1L 5P6

By signing this document you will waive certain right including the right to sue. Please read carefully.

In consideration of (your name) _____ accepting this registration, and as a term and condition of participation in this retreat or course sponsored by Heart Yoga Center. I agree to this release of claims and waiver of liability and assume full responsibility for any injury, damage, or loss which may result from participation in this course.

I understand that this course may involve a high level of both physical and emotional exertion, and as such, participation in yoga classes involve inherent risks and may result in accident or injury.

I understand that it is my responsibility to consult with a physician prior to and regarding my participation in this course. I represent and warrant that I am physically fit and able to participate and have no medical conditions that would be aggravated by the class, and have no medical condition which would prevent my full participation. Should my medical condition at any time change in any way which would prevent my full participation in the course, I agree to immediately discontinue the course and to consult with my physician about continuing or resuming participation in the yoga course.

My yoga instructor will not suggest any medical treatment to participants, as only licensed professionals are qualified to give medical advice.

I have been advised and understand that yoga classes are taught at different levels from beginner through advanced, and I understand that I am responsible for attending the appropriate level of class.

I hereby waive any and all claims or actions I may now or in the future have and release from all liability and agree not to sue Heart Yoga Center and any of its staff, including Carol (Karuna) Erickson, Paul Erickson, Jordanna Isaacson, and/or Norah Burford and their respective heirs, executors, administrators, employees, owners or agents, for any damages, costs or losses of any kind whatsoever, including but not limited to damages, cost or losses from personal injury, death, or property damage incurred or suffered by me, as a result of my use of the premises where the yoga course is taught, or any act or omission including negligence, breach of contract, or breach of any statutory or other duty of care, on the part of Carol or Paul Erickson, Jordanna Isaacson, and/or Norah Burford arising out of or related to attendance at, and participation in the Yoga Retreat/ Yoga Course.

I have read the important legal document carefully, and understand it will affect my legal rights.

DATED this _____ day of _____(month), _____(year) at the city
of _____ in the province/state of _____,
_____(country).

(Print name)

(Signature)

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Thanks for filling out the forms!
We're looking forward to a great experience together.