## YOGA WAIVER OF LIABILITY & PERSONAL INFORMATION

- 1) I understand that yoga involves some physical exertion and stretching, and I agree to take full responsibility for not exceeding my limits in the practice of yoga and for any injury or discomfort I might experience in the practice of yoga. As is with any physical activity, the risk of injury is always present and cannot be entirely eliminated. I understand yoga is not a substitute of medical attention, examination, diagnosis, or treatment.
- 2) I, the undersigned participant, accept all risks associated with my participation in yoga; and in consideration of my acceptance into the yoga program, I hereby agree and irrevocably release Lynda Spalding and Rideau Park United church of Ottawa, Ontario, a registered charity, from any claim, liability, or obligation arising out of or connected with my participation in the yoga program, whether now existing or hereafter arising, and I agree to indemnify and hold harmless Lynda Spalding and Rideau Park United church, a registered charity, for any loss or liability arising out of or connected with my participation in yoga.

**FALL Session:** 

Signature		
Printed Name		
Email	PH#	
Date		
Emergency Contact	PH#	
Doctor	PH#	_
Have you practiced yoga before?	For How Long?	
Personal Goals for taking this class:		-
Please List or Circle any Current/Past H	ealth Conditions and / or Surgeri	es <u>for Teaching &amp;</u>
Emergency Purposes:		
Asthma, Arthritis, Blood Pressure, Diab	oetes, Epilepsy, Glaucoma, Heart	Disease, Hip
Replacement, Knee Replacement, Low E and/or Other:	Bone Density, Migraines, Stroke,	Vertigo, Cancer / Kind,

Please Check with your doctor if you have health concerns.

The above information is kept strictly confidential.