

NAME: \_\_\_\_\_ DOB \_\_\_\_\_

HOW DID YOU HEAR ABOUT US: (CIRCLE ONE)

WALK/DROVE BY            WORD OF MOUTH            INTERNET

OTHER (PLEASE LIST): \_\_\_\_\_

EMAIL: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

EMERGENCY CONTACT: \_\_\_\_\_

PALOS VERDES YOGA AND FITNESS DOES NOT SHARE YOUR EMAIL ADDRESS. IT IS USED FOR ANNOUNCEMENTS AND CLASS SCHEDULES AND CHANGES. BY SIGNING BELOW, I CONSENT TO THESE TERMS

### **AGREEMENT OF RELEASE AND WAIVER OF LIABILITY**

I, \_\_\_\_\_, hereby agree to the following terms:

1. That I am participating in Yoga or Exercise Classes, Health Programs or Workshops offered by Palos Verdes Yoga and Fitness, during which I will receive information about yoga and health. I recognize that these classes: Yoga, Pilates, Core Conditioning, Zumba, and others require physical exertion that may be strenuous and may cause physical injury, and I am fully aware of the risks and hazards involved.
2. I understand that it is my responsibility to consult with a physician prior to and regarding my participation in any fitness or yoga classes. I represent and warrant that I am physically fit and I have no medical condition that would prevent my full participation in any classes held at Palos Verdes Yoga and Fitness.
3. In consideration of being permitted to participate in Yoga or Fitness Classes, Health Programs or Workshops, I agree to assume full responsibility for any risks, injuries or damages, known or unknown, which I might incur as a result of participating in the program.
4. In further consideration of being permitted to participate in Yoga or Fitness classes, Health Programs or Workshops, I knowingly, voluntarily and expressly waive any claim I may have against Palos Verdes Yoga and Fitness, for injury or damages that I may sustain as a result of participating in the program.
5. I, my heirs or legal representatives forever release waive, discharge and covenant not to sue Palos Verdes Yoga and Fitness, LLC for any injury or death caused by their negligence or other acts.
6. Palos Verdes Yoga and Fitness is not responsible for any lost, misplaced, or stolen personal items.

I have read the above release and waiver of liability and fully understand its contents. I voluntarily agree to the terms and conditions as stated above.

DATE: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

If participant is under 18:

AS LEGAL GUARDIAN OF \_\_\_\_\_, I CONSENT TO THE ABOVE TERMS AND CONDITIONS

DATE: \_\_\_\_\_ SIGNATURE OF PARENT OR GUARDIAN: \_\_\_\_\_