



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

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

PHONE: \_\_\_\_\_

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

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

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

EMAIL ADDRESS: \_\_\_\_\_ @ \_\_\_\_\_ . \_\_\_\_\_

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

ANYTHING YOU WANT US TO KNOW? \_\_\_\_\_

HOW DID YOU HEAR ABOUT US: \_\_\_\_\_

ARE YOU OKAY WITH (CIRCLE Y/N): Manual adjustments during class: Y / N

Head rubs during savasana: Y / N

### AGREEMENT OF RELEASE AND WAIVER OF LIABILITY

I hereby agree to the following:

1. I am voluntarily participating in health and fitness services, classes, programs, workshops, and/or private sessions, offered by Tula Yoga during which I will receive information and instruction about health and fitness I recognize that these fitness programs require physical exertion that may be strenuous and may cause physical injury to me, and I am fully aware of the risks and hazard involved.
2. I understand that it is my responsibility to consult with a physician prior to and regarding my participation in the Tula Yoga services. I represent and warrant that I am physically fit and have no medical condition that would prevent my participation in the Tula Yoga services.
3. In consideration of being permitted to participate in Tula Yoga services, I agree to assume full responsibility for any risks, injuries, damages or distress, known or unknown, which I might occur as a result of participating in Tula Yoga services.
4. In consideration of being permitted to participate in Tula Yoga services, I knowingly, voluntarily and expressly waive any claim I may have against Tula Yoga, LLC dba Tula Yoga, or any of its owners, directors, or employees for injury or damages that I may sustain as a result of participating in the Tula Yoga services.
5. I, my heirs or legal representatives now and forever release Tula Yoga, LLC dba Tula Yoga, and its owners, directors, or employees from any liability and agree not to sue Tula Yoga, LLC dba Tula Yoga, nor any of its owners, directors or employees for any injury or death that may result from my participation in the Tula Yoga services.

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

\_\_\_\_\_  
DATE SIGNATURE OF PARTICIPANT

If participant is under 18; as legal guardian of \_\_\_\_\_, I CONSENT to the above terms and conditions.

\_\_\_\_\_  
DATE SIGNATURE OF PARENT/GUARDIAN OF PARTICIPANT