



## **YOGA WAIVER WITH PATHWAY PARTNER**

Agreement of release and waiver of liability:

Please read and sign:

I hereby agree to the following: 1. That I am participating in yoga classes during which I will receive information and instruction about yoga. I recognize that yoga requires physical exertion, which 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 yoga classes. I represent and warrant that I am physically fit and have no medical condition that would prevent my participation in yoga classes. 3. In consideration of being permitted to participate in the yoga classes, I agree to assume full responsibility for any risks, injuries or damages, known and unknown, which I might incur as a result of participating in the program. 4. In further consideration of being permitted to participate in the yoga classes, I knowingly, voluntarily, and expressly waive any claim I may have against the instructor, the owner, or the leaseholder of the building for injuries or damages that I may sustain as a result of participating in classes or workshops held by Jasmin Cromwell at any of the venues she works out of.

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

Date: \_\_\_\_\_

Signature of participant: \_\_\_\_\_

Printed name of participant: \_\_\_\_\_

Address of participant \_\_\_\_\_

Phone number of participant \_\_\_\_\_

Email address of participant \_\_\_\_\_