

WAIVER OF LIABILITY

I, _____, PARTICIPANT, HEREBY AGREE TO THE FOLLOWING:

Participant is aware that engaging in fitness, yoga or other exercise classes may result in accident or injury, and the Participant assumes the risk connected with engaging in yoga classes and represents that the Participant is in good health and suffers from NO physical impairment which would limit their engaging in yoga classes. Participant acknowledges that **Yoga Teacher Jari Chaloupka** has not and will not render any medical services including medical diagnosis of the Participant's physical condition.

Participant specifically agrees that the **Yoga Teacher Jari Chaloupka**, shall not be liable for any claim, demand, cause of action of any kind resulting from or related to Participant's use of the facilities or engagement in yoga class or any activity within or without the **Sister O'Brien School** and Participant agrees to hold the **Yoga Teacher Jari Chaloupka** harmless from same.

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.

[Signature of Participant]

[Date]

If participant is under 18:

As legal guardian of _____, I consent to the above terms and conditions.

Signature of Client's Parent/Guardian: _____

Date: _____