



PLEASE WRITE CLEARLY AND LEGIBLY

ALL REQUESTED INFORMATION IS **REQUIRED** (and will be kept private)

Full Name: _____

Address: _____

City, ST, Zip: _____

Your Phone: _____

Emergency Contact Name: _____

Emergency Contact Phone: _____

Registration
General Release
&
Waiver of Liability

PROVIDING YOUR EMAIL ADDRESS IS **OPTIONAL** (for announcements)

Email: _____

I hereby agree to all of the following:

I am participating in the Yoga Classes offered by Yoga, Inc. d/b/a Bikram's Yoga College of India - Decatur (hereafter, "Yoga, Inc.") during which I will receive information and instruction about yoga. I recognize that yoga requires physical exertion, which may be strenuous and may cause or aggravate physical injury, and I am fully aware of and willingly assume the risk and hazards involved.

I understand that it is my sole responsibility to consult with a physician prior to and regarding my participation in the Yoga Classes. I represent and warrant that I am physically fit and I have no medical condition which would prevent my full participation in the Yoga Classes.

In consideration of being permitted to participate in the Yoga Classes, I agree to assume full responsibility for any risk, injuries, or damages, known or unknown, which I might incur as a result of participation in the program.

In further consideration of being permitted to participate in the Yoga Classes, I knowingly, voluntarily and expressly waive, renounce and disclaim any claim I have or may have against Yoga, Inc., it's instructors, officers, directors, partners, owners and employees (collectively, Yoga, Inc. "Releasees") for injuries or damages that I may sustain as a result of participating in the program.

For myself, my heirs, successors and legal representatives I forever release, waive, discharge, and covenant not to sue Yoga, Inc. for any injury or death caused by their negligence or other acts that are not intended to harm me.

I will not hold responsible/sue the Yoga, Inc. Releasees for any injuries suffered by me caused in whole or in any part by my failure or refusal to follow the instructions of you or your instructors or by any physical impairment of mine.

The tuition paid herewith and such registration fees paid hereafter are non-refundable as a matter of right; such refunds if any, as are made shall be entirely within the sole discretion of Yoga, Inc.

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 and acknowledge that Yoga, Inc. would not agree to permit me to participate in any of its programs if I chose not to.

Signature: _____ Date: _____

staff to fill out this part

1 Intro

other: _____

teacher: _____

date: _____

time: _____

