

Elmhurst Yoga Shala Inc.

STUDENT INFORMATION

Name _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____

E-Mail _____ Work Phone _____

Birth date _____ Referred by _____

In case of emergency please contact:

name _____ phone _____

Do you have any injuries or illnesses we should be aware of? _____

Do you have any previous yoga experience? How long? What style of yoga? Any specific teachers? _____

Please read the Release Information on the back of this form and sign below.

X _____ date _____

X _____ date _____
(parent/legal guardian on behalf of minor)

Liability Release

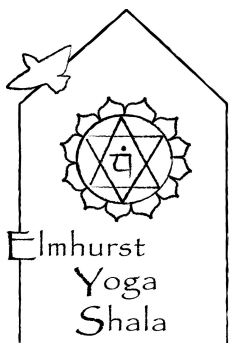
NOTICE: Before participating in this or any exercise program individuals should consult a physician. Individuals under 18 years of age must be accompanied by a parent or legal guardian to cosign this waiver. (1st class only)

VOLUNTARY PARTICIPATION: I, the undersigned, acknowledge that I have voluntarily chosen and request to participate in the yoga class, workshop, event or activity sponsored by Elmhurst Yoga Shala Inc.

ACKNOWLEDGEMENT: I am aware that participation in the yoga class, workshop, event or activity may be hazardous. I acknowledge that a certain minimum level of physical health, strength, fitness, and flexibility may be required. I represent that I possess the level of health to participate in these activities. I am voluntarily participating in these activities with knowledge of the risks of injury. I assume all responsibility and liability for any and all injuries I may sustain due to my participation in these activities.

RELEASE: In consideration for being permitted to participate in the yoga class, workshop, event or activity, I agree that I, my heirs, assignees, guardians, and legal representatives will not make any claim against, sue, or attach the property of any of the hosts, instructors, organizers, or participants in the yoga class, workshop, event or activity including but not limited to Elmhurst Yoga Shala Inc. for injury or damage resulting from my participation. I release all such hosts, instructors, organizers, and participants, their agents and heirs from any and all actions, causes of action, lawsuits, claims, or demands that I, my assignees, heirs, guardians, and legal representatives, now have or hereafter may have for any and all injury, illness, loss of or damage to property associated with my participation in the yoga class, workshop, event, or activity.

I have carefully read this agreement and fully understand its contents. I have signed this release form freely and voluntarily. I am aware and agree that it is a complete release of liability for any injuries or damages that I may sustain due to yoga classes, workshops, events and activities with Elmhurst Yoga Shala Inc. and all such hosts, instructors, organizers and participants.



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