



Welcome. Yoga Village is a place where friends can build a community in the fine tradition of Yoga. We appreciate your choice to practice with us.

Name: _____ Date: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone (H): _____ (C): _____

Email: _____

Emergency Contact (name/ph): _____

We have many offerings at our studios. Please indicate all that you might be interested in:

- Newsletter Workshops Retreats
 Yoga Teacher Training Anusara Immersions

How did you hear about us?

- internet/website professional referral / type: _____
 walk/drive by friend: _____

Please list any injuries here (use back of form as need) and inform your yoga instructors: _____

Agreement of Release and Waiver of Liability:

I, _____, hereby agree to the following: 1) I am participating in yoga classes/activities offered at Yoga Village. I recognize that yoga requires physical exertion that may be strenuous and may cause injury and I am fully aware of the risks involved. 2) I understand that it is my responsibility to consult with a physician regarding my participation in yoga activities. I represent and warrant that I have no medical conditions that would prevent my full participation in yoga activities. 3) I agree to assume full responsibility for any risks, injuries or damages, known or unknown that I may incur as a result of participating in these programs. 4) I knowingly, voluntarily and expressly waive any claim I may have against Yoga Village, the individual teachers, or the owners of the facility for injury or damages I may sustain as a result of participating in these programs. 5) I, my heirs or legal representatives forever release, waive, discharge and covenant not to sue Yoga Village, Connect with Yoga LLC, individual teachers or the facility owner for any injury or death caused by their negligence or other acts. I have read the above release and waiver of liability and fully understand its contents. I voluntarily agree to the terms of conditions stated above.

Date: _____ Signature of Participant (or parent if under 18): _____