



Waiver of Liability

1. That I am participating in Yoga/Pilates classes or workshops offers which I will receive information and instruction about Yoga / Pilate's health. I recognise that it requires physical exertion which may be strenuous and may cause physical injury and I am fully aware of the risks.
2. I have been examined by a licensed physician within the past 6 months who found me fully able to participate in at time challenging Yoga/Pilates class. I understand it's my responsibility to consult a physician prior to and regarding my participation in all Yoga/Pilates classes.
3. In consideration of being permitted to participate in classes, I agree to assume full responsibility for any risks, injuries or damages, known or unknown, which I might incur as a result of participation.
4. I will not hold you, or your partners, instructors or employees responsible for any injuries suffered by me, caused wholly or in part by my failure to faithfully follow the instruction of you or your instructor or by any physical impairment of mine that I failed to disclose.
5. In further consideration of being permitted to participate in the Yoga/Pilates classes, I knowingly, voluntarily and expressively waive any claim I have against these classes for injury damages that may occur as a result of participation.
6. I understand that classes once paid for, are non-refundable.
7. I understand to be intuitive and listen to my body.
8. I have read the above release and waiver of liability and fully understand its contents, I voluntarily agree to the terms and conditions above.