



AGREEMENT OF RELEASE AND WAIVER OF LIABILITY

Name: _____ Email: _____

How did you hear about B-1 Yoga? _____

If referred by a B-1 Member, who? _____

Have you done yoga before? Yes _____ No _____

Why did you come to B-1 Yoga? *Please circle all that apply:*

Stress Relief	Weight Loss	Fitness	Balance	Flexibility	Strength	Being Forced by a Friend
Meditation	Stillness	Spirituality	Mental Clarity	Detox		

Did you already sign up in the Wellness Living App? Yes _____ No _____

If yes, skip the information below. If no, please complete the information below.

Date of Birth: _____

Cell Phone: (_____) _____ - _____

Zip Code: _____

Home Phone: (_____) _____ - _____

Please submit a valid email and cell number to ensure proper communication.

We will send a courtesy text in case of class changes or cancellations.

It is your responsibility to inform the instructor of your limitations before class begins.

Do you have any injuries or physical limitations that could be aggravated by exercise (i.e. back, neck, shoulder or knee problems)? If so, please explain:

Emergency Contact Name/Relationship: _____ / _____

Emergency Contact's Phone number: (_____) _____ - _____

*I represent and warrant that I am in good physical health and do not suffer from any medical condition which would limit my participation in the classes offered at B-1 Yoga. I understand that it is my responsibility to consult with the physician priority and regarding risks associated with the activities offered by B-1 Yoga and I agree to follow all instructions so that I may safely participate in classes, workshops, and other activities. I hereby **WAIVE AND RELEASE** B-1 Yoga LLC, its owners, officers, employees, and instructors from any claim, demand, cause of action of any kind resulting from or related to my participation in the programs offered at the facility. In taking part in the yoga classes, workshops, or other activities at B-1 Yoga, I understand and acknowledge that I am fully responsible for any and all risks, injuries, or damages, known or unknown, which might occur as a result of my participation in the classes, workshops, or other activities. I have read the above release and waiver of liability and fully understand its content. I am legally competent to sign and voluntarily agree to the terms and conditions stated above. Please practice mindfully and enjoy the many benefits of practicing yoga with B-1 Yoga.*

Print Name: _____

Signature: _____

Date Signed: _____ / _____ / _____

If participant is under 18, a parent or legal guardian must sign:

As Parent or Legal Guardian of _____, I consent to the above terms and conditions.

Print Name: _____

Signature: _____

Date Signed _____ / _____ / _____