



AQUA OM PADDLE
New Student Information

Child's Name _____ Phone _____

Address _____ City, _____ State _____

Zip _____ Child's Grade _____ Parent/Guardian Email _____

Parent/Guardian Email _____

Agreement of Release and Waiver of Liability I _____ (print name) understand that yoga includes physical movements as well as an opportunity for relaxation, stress reduction and relief of muscular tension. I understand my child will receive information and instruction; including verbal and physical adjustments about yoga and health. As is the case with any physical activity, the risk of injury, even serious or disabling, is always present and cannot be entirely eliminated. It is my responsibility to consult with a physician prior to their participation in the yoga class. I represent and warrant that they are physically fit and have no medical condition that would prevent my full participation in the yoga class. I agree to take full responsibility for any risks, loss, claim, injury, damage or liability, known or unknown, which might incur as a result of participating in the program. Yoga is not a substitute for medical attention, examination, diagnosis or treatment. Yoga is not recommended and is not safe under certain medical conditions. I knowingly, voluntarily, and expressly agree to accept full responsibility and assume the risk for my child's participation in any and all classes, activities, apparatus, appliance, facility privilege or service, of any nature, which is owned or operated by Aqua Om Paddle, LLC. While engaging in any class or activity operated, organized, arranged or sponsored by Aqua Om Paddle, LLC, either on or off their premises, I shall allow my child to do so at my own risk, and hold Aqua Om Paddle, LLC, its employees, representatives and agents, forever harmless from any and all loss, claim, injury, damage, or liability sustained or incurred by me. I specifically agree to indemnify and hold harmless Aqua Om Paddle, LLC as to any loss, cost, claim, injury, damage or liability, sustained or incurred by participating in the classes, or through the use of the facilities or equipment of The Yoga Studio Aqua Om Paddle, or otherwise, of an employee, representative, or agent of Aqua Om Paddle, LLC. I, my heirs, or legal representative forever release waive, discharge and covenant not to sue Aqua Om Paddle, LLC for any injury or death caused by participation in the yoga class My signature below constitutes my full acceptance of this waiver. I have read the release and waiver of liability and fully understand its consent. I voluntarily agree to the terms and conditions stated above.

(Initials) _____ Photo/Video Release Form I grant permission to Aqua Om Paddle and Colonial Sports the irrevocable and unrestricted right to reproduce, broadcast and/or publish the photographs and/or video images taken of my child, for the purpose of publication, promotion, illustration, advertising, or trade, in any manner or in any medium. I hereby release Aqua Om Paddle and Colonial Sports and its legal representatives for all claims and liability relating to said images or video.

Signature of Guardian/Parent _____ Date _____