

# Yoga Class Participant Release Form

Full Name

Address

Phone Number

Email

## Emergency Contact

Name

Phone Number

## Health Information

Please list any health conditions, injuries, or limitations

## Release and Waiver of Liability

I acknowledge that participation in yoga classes involves physical activity and may carry risk of injury. I hereby release the instructor and venue from any liability for injury or other damages resulting from my participation, except for those caused by gross negligence or willful misconduct. I affirm that I am physically fit and capable of participating in yoga classes, and I have consulted a physician regarding any concerns.

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Participant Signature

Date