



Waiver and Release of Liability Agreement

SECTION I: PERSONAL INFORMATION

Name*: _____
Address*: _____ Line 2: _____
City*: _____ State*: _____ Zip*: _____
Phone*: _____ E-mail: _____

Emergency Contact Name*: _____ Emergency Contact Phone*: _____

(* denotes required fields)

How did you hear about Alchemy Studio, LLC? _____

(Please provide a name if referred by a friend or acquaintance)

SECTION II: AGREEMENT

I, (please print) _____, hereby agree to the following:

- 1. That I am participating in classes, workshops and/or bodywork sessions offered by Alchemy Studio, LLC, during which I will receive information and instruction about holistic services, meditation, yoga and overall health. I recognize that yoga requires physical exertion, which may be strenuous and may cause physical injury, and I am fully aware of the risks and hazards involved.
2. I understand that it is my responsibility to consult with a physician prior to and regarding my participation in studio classes, workshops, and/or bodywork sessions. I warrant that I am physically fit, and I have no medical condition(s) which would prevent my full participation in the classes or workshops in which I am enrolled.
3. In consideration of being permitted to participate in the classes, workshops, and/or bodywork sessions offered by Alchemy Studio LLC, I agree to assume full and complete responsibility for any risks, injuries, damages, known or unknown, to me and or my family, my heirs, agents, representatives, and or assigns as a result of me or my families' participation in the classes, workshops, and/or bodywork sessions. I, on my own behalf and on behalf of my heirs, agents and/or representatives, agree to hold harmless and indemnify Alchemy Studio LLC, its employees, instructors, contractors, agents, representatives, and/or assigns for any injuries of damages, including legal expenses that may occur as a result of my or my families' participation in the classes, workshops, and/or bodywork sessions offered by Alchemy Studio LLC.
4. I, and on behalf of my family, heirs, agents, and/or representatives, forever release, waive, discharge, and covenant not to sue or bring any other cause of action against Alchemy Studio LLC, its employees, instructors, contractors, agents, representatives, and/or assigns for any injury or death caused by their negligence or other acts.

(continued on reverse side)

I also understand that (please initial);

_____ All payments are non-refundable or transferrable for any reason, including, but not limited to vacation, illness, and injury.

_____ Scheduling and content of activities may be changed on occasion.

_____ All N.S.F. cheques will be charged a \$50.00 (CDN) fee.

_____ I will notify instructors and practitioners immediately of any pain and/or major discomfort felt during any activity.

_____ I am responsible for bringing my required equipment to every activity (where applicable).

_____ (*female clients*) If I am pregnant or plan to become pregnant I will inform the studio and its instructor and/or contractor prior to participation in a yoga class, workshop, or bodywork session.

I have read the above Waiver and Release from Liability and fully understand its contents. I voluntarily agree to the terms and conditions stated above and by signing I accept full responsibility for my participation in classes, workshops, and/or bodywork sessions, and I agree that I have been fully advised of their benefits and risks.

Please list any health concerns, surgeries, injuries or other health conditions:

Signature of Participant

Date

Signature of Parent/Guardian if under 18yrs

Date