

Waiver of Liability & Disclosure Form

This waiver of liability and disclosure form is entered into between the undersigned and Kevin R. Pyle & Associates, LLC DBA: Dragonfly Yoga. The undersigned hereby acknowledges that the following was explained to me and agrees to the following:

1. I acknowledge that Kevin R. Pyle & Associates, LLC DBA: Dragonfly Yoga and its Instructors, Subcontractors, and Employees is not a physician and are not trained in any way to provide medical diagnosis, medical treatment, or any other type of medical advice.
2. I understand there is an inherent risk associated with any exercise program including my voluntary participation in yoga that may result in injury. The exercises related to yoga will challenge my cardiorespiratory and musculoskeletal system associated with; the aerobic, anaerobic, strength, power, agility, flexibility and breathing components of the program. I understand and am aware that the components of exercise / yoga are potentially hazardous activities and my cause injury.
3. I understand that I may receive physical assists or adjustments to enhance or correct my body posture during class by either the teacher or an assistant in class. I will take accountability for alerting the teacher and assistant of any injury or impairment in advance before class begins or if I do not want to receive any assists.
4. I acknowledge that I have either had a physical examination and /or have been given permission from my physician to participate in a yoga based exercise program or that I have decided to participate in an exercise program voluntarily and without the approval of my physician and do hereby assume all responsibility for my participation in any exercise, yoga or activity associated with Kevin R. Pyle & Associates, LLC DBA: Dragonfly Yoga studio.
5. I certify that I am physically well and suffering from no medical problems, conditions, impairments, diseases, or any other illness that would prevent my participation or increase my risk of injury and / or illness as a result of partaking in any exercise and/or yoga program.
6. I, my heirs, or legal representatives, do hereby waive and release Kevin R. Pyle & Associates, LLC DBA: Dragonfly Yoga its teachers, assistants and employees from any and all liability and responsibility from injury, accident, illness, legal and medical fees sustained now or in the future resulting from my participation in any activity or use of equipment.
7. Photos and/or videos may be taken during your time at Dragonfly Yoga studio. By participating in exercise and/or yoga programs at Dragonfly Yoga, the participate give their consent and permission for such use of their image and likeness and release all rights for the use of these images.
8. I understand that Kevin R. Pyle & Associates, LLC DBA: Dragonfly Yoga studio will provide an area for personal belongings to be held during class, however, I agree that Kevin R. Pyle & Associates, LLC DBA: Dragonfly Yoga is in no way responsible for the loss or damage of any of my belongings while I attend class.

I acknowledge that I have read this waiver of liability form. I fully understand its terms and conditions, and understand that I am giving up my rights to sue Kevin R. Pyle & Associates, LLC DBA: Dragonfly Yoga, its Instructors, Subcontractors, and Employees. I acknowledge that I am signing this agreement voluntarily, and intend by my signature to be a complete and unconditional release of liability to the greatest extent allowable by law.

Print Name

Signature

Date

NEW STUDENT INFORMATION

Full Name: _____ **Date:** _____

Local Address (City, State, Zip): _____

Email: _____ (circle) Yes / No to sign up for our Newsletter!

Cell #: _____ **Home #:** _____ **Date of Birth:** _____

Emergency Contact (Name, Relationship, Phone): _____

How did you hear about us?: _____

Medical History: (Please list all health impairment, injuries, surgeries: _____

Yoga History: (If new to yoga what are your interest, concerns or questions. If you practice, please share how long and type practicing): _____

Staff Initial: _____

(484) 212 - 1675 dragonflyyogapa@gmail.com 2222 Pottstown Pike, Pottstown, PA 19465

<http://www.dragonflyyoga.net>