## **one**healthclubs

## Hot Yoga Liability Waiver

Member Name	
Membership #	Date
Home Address	
City	Postal Code
Home Phone #	Cell Phone #
Email Address(Required for updating information regarding class changes – to be protected from third party access.)	
Emergency Contact Name	Phone #
Any injuries, ailments, or medications the instructor and studio should be aware of:	
How did you hear about us?	

1. That the instruction offered by One Health Clubs is limited to that of instruction in basic yoga and health.

I, (participant name)\_

2. That even with clear instruction, there is a possibility of injury, and that it is my responsibility to consult a physician regarding my ability to participate before coming to hot yoga at One Health Clubs.

\_, agree to the following:

- 3. I attest that I have no psychological, medical or emotional condition that would prevent me from safe participation in a hot yoga class.
- 4. I release and discharge One Health Clubs, its directors, and One Health Clubs yoga instructors from any and all liability, claim, demand or action that I may have resulting from injury, death or damages arising from my participation in the yoga class or at that yoga studio, including loss that may be caused by the negligence of the released party.
- 5. I release and discharge One Health Clubs, its directors and its instructors from any and all liability, claim, demand or action that I may have related to the loss, theft or damage of any of my personal property from the premises of One Health Clubs.
- 6. I recognize that this agreement of release and waiver of liability is a legal contract and that, by reading it carefully, I have complete knowledge of its contents.