

ENROLLMENT AND WAIVER FORM

PLEASE PRINT

GENERAL INFORMATION

Name: _____ Date: _____ Age: _____

Address: _____

City/State/Zip: _____

Home Phone: _____ Cell Phone: _____ E-mail: _____

Emergency Contact: _____ Relationship to you: _____

Emergency Contact Phone(s): _____

Limitations/Injuries: _____

Release and Waiver of Liability

In any physical activity the risk of serious physical injury is possible. You are advised to consult with your physician prior to beginning any exercise regimen, including yoga and/or pilates. Yoga and/or pilates are no substitute for medical diagnosis and treatment. Yoga and/or pilates practice and/or specific poses are not recommended for individuals with certain conditions (e.g., back issues and/or injuries, cardiac illness, later stages of pregnancy, post-surgery). The student assumes the risk of yoga and/or pilates practice and releases Solid Ground Yoga, LLC, its managers, members, agents, employees, and independent contractors (collectively, the "Solid Ground") from any liability or claims of any sort arising out of the yoga and/or pilates instruction provided by Solid Ground.

I, _____, am participating in yoga and/or pilates classes, or workshops, conducted by Solid Ground ("Yoga and/or pilates"). I am at least eighteen (18) years of age (if under 18, form must be signed by parent or guardian). I am aware of the physical risks involved with strenuous exercise such as Yoga and/or pilates; expressly agree to assume the entire risk of any and all personal injury which I or others may suffer during the time I am participating in Yoga and/or pilates, whether due to negligence of others or not; acknowledge that I have been advised by Solid Ground to consult with my physician before participating in Yoga and/or pilates; and understand it is my personal responsibility to consult with my physician prior to participating in Yoga and/or pilates. I have no medical condition, which would prevent me from taking part in Yoga and/or pilates, and I assume responsibility for any risk or injury I may sustain as a result of my participation.

Furthermore, I hereby agree to not to sue Solid Ground, and any and all of its managers, members, and employees, agents, and independent contractors (collectively, the "Released Parties") for injury or damage which occurs during or as a result of yoga and/or pilates. I hereby forever release and discharge the Released Parties from any and all claims, demands, causes of actions, or liability of any kind whatsoever, which I may now or in the future have, known or unknown, which any way results from or arises out of or during the course of the Yoga and/or pilates. I further agree to indemnify, defend, release, and hold harmless the Released Parties from and against any and all claims, causes of action, demands or charges of whatever nature which I may claim to have or do have for injury and damages arising out of Yoga and/or pilates, even if caused in whole or in part by the Released Parties.

I HAVE READ AND VOLUNTARILY SIGN THIS RELEASE AND WAIVER AND FURTHER AGREE THAT NO ORAL REPRESENTATIONS, STATEMENTS, OR INDUCEMENTS APART FROM THE FOREGOING WRITTEN AGREEMENT HAVE BEEN MADE. I AGREE TO THE TERMS AND CONDITIONS STATED ABOVE.

Date: ____ / ____ / ____

Signature

Parent's Signature (if under 18 years of age):

SYCAMORE SQUARE SHOPPING CENTER
1334 SYCAMORE SQUARE | MIDLOTHIAN, VA 23113
804.897.BEND(2363)

WWW.SOLIDGROUNDYOGA.COM