



Yoga Vacation with Claire in Jamaica 2024 Registration and Release/Waiver

Name	
Address	
City, State, Zip Code	
Email	
<i>Note: Email will be used to communicate all details of yoga vacation</i>	
Phone: Home/Cell	
Accommodations:	<i>Check preference below</i>
Single	
Double (List Roommate)	
Travel Details:	<i>Please complete flight information once ticket is purchased.</i>
Airline	
Arrival Date/Flight #/Time	
Departure Date/Flight#/ Time	

Balance (minus your \$200.00 deposit) is due by **January 1, 2024** (Single Occupancy Balance: \$1,525.00; Double Occupancy Balance: \$1,275.00 per person). Make checks payable to Claire Liddle (Submit in envelop to Claire at the studio or mail to Claire at 203 Lake Drive, Myrtle Beach, SC 29572).

AGREEMENT OF RELEASE AND WAIVER OF LIABILITY

By my signature below, I hereby agree to the following:

That I am participating in the *Yoga Vacation with Claire in Jamaica 2024* offered by *Claire Ritchie Liddle* as an individual during which, I will receive information and instruction about yoga. I recognize that yoga requires physical exertion that may be strenuous and may cause physical injury and I am fully aware of the risks and hazards involved. I also understand that I am participating in the *Yoga Vacation with Claire in Jamaica 2024* as an individual traveling on vacation. I understand that it is my responsibility for any risks, injuries, or damages, know or unknown, which I might incur as a result of participating in the program. The informing of my physical conditions is simply to enable the instructor to provide optimal instruction and in no way absolves me of this responsibility. Therefore, heirs, my legal representatives, or I waive any claim I may have against *Claire Ritchie Liddle* or *claire liddle yoga*.

Signature

Date