



LIABILITY RELEASE AGREEMENT

I _____ (print name) understand that yoga and other services (including but not limited to Reiki, Energy work, Thai massage, Wellness Coaching, Holistic Nutrition Coaching) offered at Udana Yoga and Wellness LLC include physical movements as well as an opportunity for relaxation, stress reduction and relief of muscular tension. As is the case with any physical activity, the risk of injury, even serious or disabling, is always present and cannot be entirely eliminated. I understand that it is my responsibility to consult with a physician prior to and regarding my participation in yoga or other wellness services with Udana Yoga and Wellness LLC. I understand that Udana Yoga and Wellness LLC and its practitioners are not medical professionals nor claim to be medical professionals. I represent and warrant that I am physically fit and I have no medical condition which would prevent my participation in yoga or the service I am receiving at Udana. If I experience any pain or discomfort, I will listen to my body, adjust the posture and/or ask for support from the teacher or practitioner. In consideration of being permitted to participate in yoga and other wellness activities, I agree to assume full responsibility for any risks, injuries, or damages, known or unknown, which I might incur as a result of participation.

Yoga and other services offered at Udana Yoga and Wellness LLC are not a substitute for medical attention, examination, diagnosis or treatment. Yoga and other wellness services may not be recommended and may not be safe under certain medical conditions. I affirm that I alone am responsible to decide whether to practice yoga or receive other wellness services. I hereby agree to irrevocably release and waive any claims that I have now or hereafter may have against Udana Yoga and Wellness LLC.

Signature of participant

Signature of parent/guardian (if under 18)

Date