

Kids Yoga Registration Form

Child's Name:				Birth Date:	
Parent/Guardian Name:					
Address:					
City, State:				Zip:	
Work Phone		Home Phone:		Cell Phone:	
Parent's Email				Birth Date:	
Emergency Contact Name:			Emergency Contact Phone:		
Does your child have any physical limitations or conditions you need to bring to our attention?					Yes No
If so, what are they:					

Waiver & Release

I, _____ (please print your full legal name here), hereby acknowledge the above and agree to the following:

As the student taking classes or workshops at Sunny Meadow Yoga (SMY), I understand that SMY classes, camps, and workshops include physical movements and exertion. 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 SMY classes. I represent and warrant that I am in good health and physical condition and I have no medical condition which would prevent my full participation in SMY classes. In addition, I will make the instructor aware of any medical conditions or physical limitations before class. If I am pregnant, become pregnant or I am post-natal or post-surgical, my signature below verifies that I have my physician's approval to participate. In consideration of being permitted to participate in SMY classes, I agree to assume full responsibility for any risks, injuries or damages, known or unknown, which I might incur as a result of participating in the program. In further consideration of being permitted to participate in SMY classes, I expressly irrevocably release and waive any claims that I have now or may have hereafter for any reason against Sunny Meadow Yoga, its owners, employees and independent contractors, for injury or damages that I may sustain as a result of participating in a SMY class.

For Parents Registering Children for Kids Classes, Workshops, or Camp: I am the parent and/or guardian of the minor child/children for whom I am registering. I have read this release and permission and fully understand its contents, and I have the full right and authority to execute this release and permission.

→ _____
DATE SIGNATURE OF PARTICIPANT

→ _____
DATE SIGNATURE OF PARENT OR GUARDIAN IF UNDER 18 YEARS OF AGE