



WESTCHESTER'S PREMIER HOT YOGA STUDIO

New Student Agreement of Release & Waiver of Liability
PLEASE PRINT LEGIBLY

Name: _____ Birthday(*free class*): _____

Street address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Referred by: _____ ad/article _____ friend (name: _____) walk by _____ Internet

1 . I am or will be participating in the Yoga classes, Health Programs or Workshops offered by YogaSpa (Bodhi Building, Ltd) during which I will receive information and instruction about yoga and health. These classes entail intensive physical activity (conducted in a heated room- approx.105 degree Fahrenheit) and exertion by me. I recognize that such physical activity and exertion may be difficult and strenuous and may cause or aggravate a physical injury or medical condition. I am fully aware of and accept the risks and hazards involved.

2 . I understand that it is my responsibility to consult with a physician prior to and regarding my participating in the Yoga Classes, Health Program or Workshops, and to receive prior approval to participate. I represent and warrant that I am physically fit and I have no medical condition or injury which would prevent my full participation in the Yoga classes, Health Program and Workshops.

3 . In consideration of being permitted to participate in the Yoga Classes, Health Programs or Workshops, I agree to assume full responsibility for any risks, conditions, injuries or damages, known or unknown, which I might incur or aggravate as a result of my participating in same. I understand that there may be physical adjustments by the teacher from time to time and that it is my responsibility to let the teacher know if I don't want to be touched/adjusted.

4 . In further consideration of being permitted to participate in the Yoga Classes, Health Programs or Workshops (the "Programs"), I knowingly, voluntarily and expressly waive any claim I may have or acquire against YogaSpa (Bodhi Building, Ltd), or the Landlord or Bikram Choudhury, or James Barkan, or any premises at which it may operate, for any injury, condition, or damages that I may sustain as a result of entering or being on the premises or participating in the Programs.

5 . I, my heirs or legal representative forever release, waive, discharge and covenant not to sue YogaSpa (Bodhi Building, Ltd) or Bikram Choudhury, or James Barkan, or the landlord of any premise at which it may operate, for any injury, condition, or death which arises, is caused by or is aggravated by reason of my participation in the Programs.

6 . I understand that it is my continuing responsibility to inform the instructor(s) at YogaSpa (Bodhi Building, Ltd) of any previous medical conditions, injuries or surgeries prior to my first class and at such other times as I require information as to same. Please list any previous conditions, ailments, injuries and/or surgeries below; if none, please write N/A:

If you are pregnant or may be pregnant, it is your responsibility to consult your physician before participating in classes.

7 . The tuition paid herewith and such registration fees paid hereafter are non-refundable; such refunds, if any, as are made shall be entirely within the discretion of YogaSpa (Bodhi Building, Ltd).

8 . I also understand that, except for the discretionary monetary refund referenced above, I have no claims against YogaSpa (Bodhi Building, Ltd),, or the landlord of the premises or Bikram Choudhury, or James Barkan by reason of their refusal to allow me to participate in the Programs.

9 . I further understand that YogaSpa (Bodhi Building, Ltd) has partnered with StudioLiveTV to record and distribute both live and recorded classes, and from time to time employs Philip Stark Photography or any other such entities. As such, we retain the right to take photographs and/or any such images, and such images remain the sole property of YogaSpa (Bodhi Building, Ltd), and/or the aforementioned entities.

I have read the above Release and Waiver of Liability and fully understand its contents. I voluntarily agree to the terms and conditions stated above.

Date _____ Signature of participant _____

Under18-Legal Guardian _____ Emergency Name and Phone# _____

321 Tarrytown Road, Elmsford, NY 10523 | 914.345.YOGA (9642) | yoga-spa.com

YogaSpa is a division of Bodhi Building, Ltd