

Liability Waiver

The Light of yoga with Lorena Abregu

LIABILITY WAIVER/INFORMED CONSENT FORM

I, _____, hereby agree to the following:

Lorena Abregu offers the following classes and services (which may vary from time to time): Yoga Classes, Kid's Yoga, Meditation, Massage Therapy Holistic, Vinyasa Yoga (different level). The nature of the services and classes offered have been thoroughly explained to me, and I understand that participating in any of them is potentially hazardous. I recognize and understand that these classes, services and programs require unique and strenuous physical exertion which may cause physical injury, and I am fully aware of the risks and hazards involved. I understand and agree that I should not enter or participate in any class unless I am medically and physically able to do so, and I represent that I am fit and able to safely participate in the classes that I enroll in. I have been instructed not to enroll in any class until and unless I have consulted with and been examined by a physician and advised by the physician that I am medically and physically capable of performing the strenuous activities required without incurring or suffering injuries. I personally and knowingly assume all of the risks associated with the classes I enroll in, including, but not limited to, the risk of physical injuries associated with the activity as well as through contact with other participants.

After reading and understanding this Liability Waiver/Informed Consent Form and knowing the facts and risks involved and in consideration of being accepted and permitted to participate in the classes offered by Lorena Abregu, I, for myself, and anyone acting on my behalf, waive, release and hold harmless

LORENA ABREGU and any others individual or group associated therewith from and against all claims, damages, liabilities, costs and expenses of any kind, including attorney's fees, arising out of my participation in any service, class or program offered by LORENA ABREGU where liability may arise out of my participation, negligence or carelessness and/or the participation, negligence or carelessness of any other individual or organization named or intended in this Waiver.

I further certify that I am of legal age or, if below the legal age, that this Liability Waiver/Informed Consent Form is being signed by my parent or legal guardian, that I have read this Liability Waiver/Informed Consent Form fully and completely, that I understand it and that I freely agree to all of its terms. I affirmatively state that I am in good physical condition and do not suffer from any disability or condition which would restrict, prevent or limit my full and vigorous participation in classes and programs. I further acknowledge that my enrollment and subsequent participation is purely voluntary and in no way has it been mandated, solicited or coerced by LORENA ABREGU or any other party. I fully understand that despite all precautions, I may injure myself or be injured by someone else as a result of my enrollment and subsequent participation in a program, class or service offered, and despite same, this release of LORENA ABREGU and its place where the classes take place, shall be effective now and in the future for any injury or condition that I may suffer by reason of my participation or would not have suffered but for my participation. These conditions and injuries may include, but are not limited to, heart attacks, muscle strains, muscle pulls, muscle tears, broken bones, bruises, shin splits, heat prostration, knee injuries, back injuries, spinal injuries, leg injuries, foot injuries, or any other injury, illness or soreness that may occur, including death.

I HEREBY AFFIRM THAT I HAVE READ AND FULLY UNDERSTAND THE STATEMENTS AND PROVISIONS MADE IN THE ABOVE LIABILITY WAIVER/INFORMED CONSENT AND WOULD NOT ENROLL OR PARTICIPATE IN ANY PROGRAM, CLASS OR SERVICE OFFERED UNLESS ALL OF THE FOREGOING WERE TRUE, CORRECT AND AGREED TO.

_____ (Participant Signature)