



## Go Aerial Fitness LLC Release of Liability/Program Participation Waiver

By signing this waiver, the undersigned acknowledge that physical exercise can be strenuous and that participation in any sort of fitness program or activity contains a risk of injury. Because physical exercise can be strenuous and subject someone to risk of serious injury, Go Aerial LLC (a/k/a Go Aerial Fitness LLC) and Kelly Legacy LLC (collectively known as "Go Aerial") urges you to obtain a physical examination from a doctor before beginning any exercise or training program, including those offered by Go Aerial. Yoga and other fitness programs may cause injury such as pulled or strained muscles, or more serious conditions. Despite these risks of injury, the undersigned (hereafter referred to as "I") have chosen to participate in programs and activities offered by Go Aerial.

If you have the following conditions, you may not want to do Aerial Yoga: Recent Surgery, High or Low Blood Pressure, Pregnancy, Glaucoma, Head Cold, Flu or Sinusitis, Spinal Injury, Heart Disease, Easy Onset Vertigo, Osteoporosis or Bone Weakness, Recent Concussion or Head Injury, Recent Stroke, Epilepsy, Artificial or Re-Surfaced Hips, Botox Injections (within 48 hours of class). Some of the aforementioned conditions are contraindicated due to inverted positions. Speak with your doctor on whether you should participate in Aerial Yoga if you have any condition that is listed. Please let your instructor know if you have any of the listed conditions, or if during class you feel any pain or discomfort.

If you have the following conditions, you may not want to do Hot Yoga: Certain Prescription Medications, Cardiovascular Conditions, Pregnancy, Infections, Fever, Joint Injury, any Condition associated with decreased sweating, Sunburn, Heat Stroke. It is important that you check with your doctor before practicing in a hot environment if you are at all uncertain if it is safe for you. If at any point during practicing, you experience pain, dizziness or nausea stop practicing immediately. Be sure to consume plenty of water before, during and after class to prevent dehydration and other negative effects.

I hereby release and hold harmless Go Aerial and each of their officers, members, employees, instructors, trainers, agents, and volunteers from any and all loss claim, injury damage, negligence, or liability sustained or incurred by me or my property that may arise from my participation in programs or activities offered by Go Aerial. I specifically agree to indemnify and hold harmless, and release from liability, Go Aerial, and each of their officers, members, employees, instructors, trainers, agents, and volunteers as to any loss, cost, claim, injury, damage, liability, sustained or incurred by using the facilities or equipment of Go Aerial, which may be caused by an act or omission, whether negligent or otherwise, of Go Aerial, and each of their officers, members, employees, instructors, trainers, agents, and volunteers during any programs or activities offered by Go Aerial, whether such programs or activities are offered in a facility owned by Go Aerial or off-site at another location. I knowingly and freely assume all risks associated with my

participation in this/these programs offered by GO Aerial and I understand that I am responsible for all medical expenses that I may incur. I further agree that the releases contained in this Release are intended to be as broad and inclusive as permitted by law and that if any portion of this Agreement is deemed invalid, the balance of it shall continue to be in full force and effect.

Finally, your photograph (or child's) may be included on our website or Facebook/Instagram page. By participating in Go Aerial's program or activities, I hereby consent to Go Aerial using my image and likeness.

By signing below, I acknowledge that I have read, understood, and fully accepted the terms of this release.

Printed name: \_\_\_\_\_ Signature: \_\_\_\_\_

Email address: \_\_\_\_\_ Date: \_\_\_\_\_

**Participation of minors:**

If the participant is under 18 years of age, the section below must be completed by that participant's parent/guardian:

I, \_\_\_\_\_, am the parent/guardian of the minor child(ren) listed above. By signing below, I acknowledge and agree that the releases and waivers set forth above are applicable to my minor child(ren) to the fullest extent permitted by law..

Name of Child: \_\_\_\_\_ Age: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_