



Waivers, Releases, Conditions & Terms

for participating in a *mumukshu LLC* yatra

Please review all pages. Sign, scan and email this entire document to mumukshulife@gmail.com

Incomplete forms will not be considered.

mumukshu

Registration

Liability Waiver

1. I understand that my attendance of any *mumukshu LLC* hosted event, whether on-site, on-line, or remotely held across the globe carries certain physical, financial, spiritual, emotional, and mental risks.
2. I personally assume all risks, and do not hold *mumukshu LLC* liable for any personal physical, spiritual, emotional, and mental injury which is a result of attendance, participation, enrollment, and/or engagement in a *mumukshu LLC* sponsored event, whether on-site, on-line, or remotely held across the globe. I hereby take action for myself, my executors, administrators, heirs, next of kin, successors and assigns as follows:
3. I irrevocably WAIVE, RELEASE AND DISCHARGE *mumukshu LLC* FROM ANY AND ALL LIABILITY for my death, disability, personal injury, financial loss, property damage, property loss, property theft, or actions of any kind which hereafter may occur to me or my property while on-site at any *mumukshu LLC* owned or leased property or off-site event, including my traveling to and from a *mumukshu LLC* site or event.
4. I irrevocably WAIVE, RELEASE AND DISCHARGE FROM ANY AND ALL LIABILITY any and all *mumukshu LLC* directors, managers, officers, employees, volunteers, representatives and agents.
5. I HOLD HARMLESS AND AGREE NOT TO SUE the entities or persons mentioned in this waiver as to any and all liabilities or claims made as a result of participation, whether caused by the negligence of the participant(s) or otherwise.
6. I hereby consent to receive medical treatment that may be deemed advisable in the event of injury, accident and/or illness while I am on the trip with *mumukshu LLC*. I will be responsible for any and all medical costs for myself.
7. I further acknowledge that I shall not now or at any time in the future bring any legal action against *mumukshu LLC*, and that this waiver is binding on me, my heirs, my spouse, my children, my legal representatives, my successors and my assigns.
8. I further acknowledge that I am, to the best of my knowledge, physically, spiritually, emotionally, financially and mentally fit for attendance, participation, and/or engagement in the *mumukshu LLC* hosted event I am enrolling in, whether on-site, on-line, or remotely held across the globe.

Audio, Video, Written Word and Response Waiver

I understand as a result of my attendance, participation, enrollment, and/or engagement *mumukshu LLC* hosted event, whether on-site, on-line, or remotely held across the globe, I may be photographed, video recorded, and or asked for a testimonial for purposes of sales, marketing and promotion. I therefore agree to allow my photo, video or film likeness to be used for any legitimate, ethical, and moral purposes by *mumukshu LLC*.

Payment Terms, Cancellations & Refunds

Payment Terms

Payment for yatras is paid at a predetermined amount at the time of registration (non-refundable) and remainder payment in full is due at 60 days before the first day of the retreat.

Registration is not considered final and complete until we have received full payment..

Cancellation Policy

- Cancellation outside of 60 days - 50% refund of fees paid less \$100 processing fee and non-refundable deposit.
- Cancellation within 60 days - No refunds.
- This includes cancellations FOR ANY REASON including due to spikes in covid, international restrictions from entering India, or other acts beyond our control. For this reason we strongly recommend all participants to purchase travel insurance.
- **All refunds are subject to \$100 processing fee. No Credit vouchers will be issued.**

I hereby certify that I have read these terms and conditions and I understand the content of this document. I hereby certify that I alone am responsible to decide whether to partake in all terms defined herein this agreement. I am aware that this is a release of liability and I participate in it of my own free will.

Full Name (Please Print) - as it appears in your passport

Signature

Date
