



RELEASE FORM (for Age 18 and up)

CONTACT INFO:

NAME: _____

ADDRESS: _____

_____ Zip: _____

eMail: _____

Birth Date (Mo/Da/Yr) _____

You will receive emails related to your account (e.g., sales receipt, expiration date reminder). May we also send you our newsletters (e.g., new classes, class cancellations, Yoga-related workshops, special offers)?

Yes No

HOME PHONE: _____

WORK PHONE: _____

CELL PHONE _____

Check Here If You Are Eligible For A Discount:

65 or older

Add'l Family Member

Active Duty Military or Immed Family

Veteran

Full Time Student

How did you find out about Serenity Yoga Studio? _____

EMERGENCY CONTACT(S):

1. Name _____

Phone _____ Relationship _____

I certify that I am able to participate in a Yoga class.

RELEASE OF LIABILITY As Yoga teacher professionals, we are responsible for providing competent instruction. We are not responsible for ensuring the safety of students beyond providing competent instruction. It is important you attend classes that are the appropriate level(s) for you – if you need help selecting classes, please contact Toni. By signing this form, you hereby release Toni Bradley, Serenity Yoga Inc., and any instructor teaching at Serenity Yoga Center or other designated locations from any and all liability for injuries that are not directly and proximately caused by professional negligence. Serenity Yoga Center is a member of a network of Yoga studios affiliated with Kripalu® Center for Yoga and Health, Stockbridge, Massachusetts. This Yoga studio, like all Kripalu affiliated Yoga studios, is independently owned and operated. Kripalu Center for Yoga and Health is neither responsible nor legally or financially liable for the activities conducted at this Yoga studio. **I certify that the information I provided is true and complete to the best of my knowledge.**

Signature _____ Date _____