**CatFit Yoga**

**REGISTRATION/WAIVER**

Name of Participant (First and Last): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: Please print clearly to sign up for our newsletter \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How did you hear about us? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \

INFORMED CONSENT FOR EXERCISE PARTICIPATION

I desire to voluntarily participate in programs offered within or without of the studio premises by CatFit Yoga in Crossville, TN. I understand that the activities are designed to place a gradually increasing workload on the body in order to improve overall fitness. I understand that I am responsible for monitoring my own condition throughout my workouts and should any unusual symptoms occur, I will cease my participation and inform instructor of the symptoms. I acknowledge that CatFit Yoga and their instructors have not and will not render any medical services including medical diagnosis of my physical condition.

I hereby grant CatFit Yoga, LLC and its agents the irrevocable and unrestricted right to use, reproduce and publish photographs, video or film of me, including my image, likeness and/or voice as depicted therein, for use in their publications of any kind including but not limited to their website and advertising and marketing materials. I hereby release CatFit Yoga, LLC and any legitimately related entities from any and all claims, actions and liability relating to the use of said photographs, videos or audios. This waiver and release of liability shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law.

In signing this consent form, I affirm that I have read, accept and understand this form in its entirety and that I understand the nature of exercise. I know that there may be risks associated with fitness classes that include, but not limited to, serious injuries to neck, spine and other aspects of musculoskeletal system, cardiac arrest, death, and serious injury or impairment to other aspects of my body, general health, and well-being, and willingly accept those possibilities. I know that it is my responsibility to ensure my own safety. I take full responsibility for my own health and safety in participating in programs offered by CatFit Yoga and to the extent I deem advisable, will consult a physician before participating in any of the activities. I agree to pay all reasonable costs related to the classes, including any medical costs I incur.

AGREEMENT AND WAIVER / RELEASE OF LIABILITY

In consideration for being allowed to participate in these activities, which I do freely and voluntarily for my own personal benefit, I hereby take action for myself, my executors, administrators, heirs, next of kin, successors and assigns to:

1. Waive, release and discharge from any and all liability to CatFit Yoga, their elected and appointed officials, employees, fitness instructors, agents, and volunteers for my death, disability, personal injury, property damage, or property theft, or actions of any kind which may hereafter accrue to me.
2. Indemnify and hold harmless CatFit Yoga, their elected and appointed officials, employees, fitness instructors, students, agents, and volunteers, from any and all liabilities or claims made by other individuals or entities as a result of or relating to my participation in any and all programs offered by CatFit Yoga.

Therefore, intending to be bound and as a condition of being allowed to participate in programs at CatFit Yoga, I have freely signed this waiver on the date indicated.

Participant Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_

Parent/Guardian Signature (Required if under 18 years old): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Parent/Guardian Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

