Yoga Waiver Form PDF

Section 1: Participant Information • Full Name: _____ • Address: _____ • Email: _____ Phone Number: **Section 2: Health Declaration Section 3: Waiver of Liability** • [Checkbox] I acknowledge the inherent risks... • [Checkbox] I voluntarily agree... **Section 4: Emergency Contact** • Name: _____ Relationship: ______ Phone Number: _______ **Signature Section:**

• Date: _____