Disclaimer Form

I, _____hereby agree to the following:

1. That I am participating in the Yoga classes or any other exercise programmes offered by Emily Moll during which I will receive information and instruction about yoga, physical exercise or health. I recognize that exercise requires physical exertion, which may be strenuous and may cause physical injury, and I am fully aware of the risks and hazards involved.

2. I understand that it is my responsibility to consult a physician prior to and regarding my participation in the yoga classes, health programs or workshops offered by Emily Moll.

   I represent and warrant that I am physically fit and I have no medical condition, which would prevent my full participation in these yoga classes, health programmes or workshops.

3. If I am pregnant I understand that I participate fully at my own risk and that of my unborn child/children.

4. In consideration of being permitted to participate in the yoga classes, health programmes or workshops, I agree to assume full responsibility for any risks, injuries or damages, known or unknown, which I might incur as a result of participating in the programmes offered by Emily Moll.

5. In further consideration of being permitted to participate in the yoga classes, health programmes or workshops, I knowingly, voluntarily and expressly waive any claim I may have against Emily Moll for injury or damages that I may sustain as a result of participating in these programmes.

6. I understand that from time to time during yoga classes, the instructor may physically adjust students' form and posture. If I do not want such physical adjustments, I will so inform the instructor at each class I attend. I also acknowledge that if I do wish to receive such adjustments, it is my responsibility to inform the instructor when an adjustment has gone as far as I desire at that time.

7. I _____hereby take full and sole responsibility from any liability of loss or damage to personal property associated with yoga classes or any other events.

8. I, my heirs or legal representatives forever release, waive, discharge and covenant not to sue Emily Moll or her employees for any injury or death caused by their negligence or other acts.

I have read the above release and waiver of liability and fully understand its contents.
I voluntarily agree to the terms and conditions stated above under my own free will.

Name _____Signature _____Date_____

yoga alliance uk