



Name: _____ Birth Date: ____/____/____
Address: _____
City: _____ Zip: _____
Email: _____ Phone: _____
Emergency Contact Name & Relationship: _____ Emergency Contact Phone: _____

General Waiver, Release, & Agreement

I understand that Yoga includes physical movements as well as an opportunity for relaxation, stress re-education, and relief of muscular tension.

Yoga is not a substitute for medical attention, examination, diagnosis, or treatment. Yoga is not recommended and it is not safe under certain medical conditions. I understand it is my responsibility to have checked with **my licensed health care provider PRIOR** to class to decide if Yoga practice is right for me. I affirm that I alone am responsible to decide whether to practice Yoga.

As is the case with any physical activity, the risk of injury, even serious or disabling, is always present and cannot be entirely eliminated. Prior to class, I will let my teacher know of any injuries, medical conditions, or discomfort I may have, and I will inform my teacher immediately if any of these arise in class. If I experience any pain or discomfort, I will listen to my body, respect my limitations, and adjust the posture accordingly, and also inform the teacher.

Where a Parent signs a Child into class, the Parent or Guardian accepts this waiver on the Child's behalf.

If I am **PREGNANT**, I understand that I must **check with my licensed health provider PRIOR to class** to decide if Yoga is right for me. I am aware that there is **added risk** to practicing yoga while pregnant, and I assume any and all responsibility for any Yoga practice I decide to undertake.

I am fully aware of the risks of practicing Yoga and am participating in yoga classes at my own risk. I hereby agree to irrevocably waive and release Emma Virginia Hill and Alligator Healings Arts Yoga LLC from any and all liability, negligence, or other claims arising from or in any way connected with my participation in or attendance at Yoga class. I further acknowledge that I shall not now or at any time in the future bring any legal action against Emma Virginia Hill, Alligator Healings Arts Yoga LLC, Marietta Elizabeth Ward, Dennis Price, Dottie Price, and Steven Hankins; and that this waiver is binding on me, my heirs, my spouse, my children, my legal representatives, my successors and my assigns. My signature verifies that I am physically fit to participate in Yoga classes and a licensed health care provider has verified my physical condition for participation in this type of class **PRIOR** to my attendance. My signature is binding to this liability waiver and agreement from this day forth.

FULL PRINTED NAME _____

SIGNATURE _____ DATE _____

WE RESPECT YOUR PRIVACY; YOUR INFORMATION IS NEVER SHARED.

Please explain any injuries, medical conditions, or other concerns of which your yoga teacher needs to be aware.

What are your goals for your yoga & meditation practice? This will help us cater future classes for your needs and interests.

Terms & Conditions of Registration & Attendance:

- If you have any medical concerns, injuries, allergies, are pregnant, or have any changes in such conditions, it is your **duty & responsibility to inform your teacher prior to the session.**
- Your place is held only upon **receipt of tuition payment for the full course** or for the one-class casual rate; payment must be made **prior** to the Term course, casual class, or workshop.
- Payments for Yoga classes are **non-refundable**, unless your course/workshop/class is taken off the weekly schedule due to low enrollment, dire teacher emergency, or unavoidable natural disaster.
- Commitment is for the entire 10-week course (8-weeks for Saturdays) to receive the dedicated practitioner rate.
- There are **no pro-rated** tuition fees for absences and **no make-up classes** for missed days.
- Payments for this Term are **not transferable** to a future/different class, course series, term, or event. **All course passes expire the last day of the course in the Term; all one-day drop-in registrations expire the day of the reservation.**
- Once you register for a **Casual Class**, attendance is valid for **that day and class time only**; there are also **no make-up classes, refunds, or substitutions.**
- **Bring your own yoga mat.** Shared yoga mats are only available for a rental fee of \$2.
- Advise your teacher with 24-hours advance notice if you are unable to attend (text message is preferred) so your place may be made available for another student.
- The teacher holds the right to cancel or reschedule any classes, sessions, or events due to extreme illness or emergencies. Students will be notified of the rescheduled date and every attempt will be made to accommodate each student's schedule.
- Credit-debit payments are completed online. Cash or check (made out to "AHA Yoga") is paid in person or mailed (305 East Duval Street, Suite 101, Lake City, FL 32055).
- Turn off or put all cell phones on silent.
- **Words and energy matter!** This is your time to turn inward, and much **care** has been given to **cultivating a sacred, safe space conducive to personal growth.** You and your colleagues are doing **deep work** when you undertake this tradition of yoga. **Please be respectful of your peers and teacher and maintain the calm, peaceful, and quiet space.** This means this is not the time for gossip, complaining, or leftover conversations from work, or any less than **tender-hearted, well-intended speech.** Take this time and space to breathe and transition into your practice and allow your **best self to shine.**
- Please take your **shoes off at the door** of the studio to keep the floor clean, sanitary, and neat.
- Be on your mat and ready to go at the starting time.
- It's best not to eat one hour prior to yoga; for some people, 2 hours are required.
- If anything can be done to **make your experience more comfortable, secure, and successful**, please let your teacher know (temperature, bathroom needs attention, you need to leave early, special concern, etc.). Suggestions to improve your yoga & meditation experience are welcome.
- A separate **Waiver & Release for AHA Yoga** must be completed and signed prior to practice on your first day.

Please indicate and sign below that you understand and agree to the above payment policies, terms & conditions, and class etiquette.

_____ Yes! I have **read and agree** to these payment policies, terms and conditions, and class etiquette, and have been provided a copy.

Sign Name _____ Print Name _____ Date _____

These policies allow me to continue offering you the **best possible yoga teachings** I can and ensure our community runs smoothly. Should you prefer to pay in cash or check, or **require a payment plan**, let me know and we can arrange something that serves both of us and allows you to partake of these unique yoga and meditation offerings. Connect with me if you have any questions!

In service, Virginia Hill, AHA Yoga Teacher, Studio Founder, and Manager