

Springbank Hill Community Association

Yoga Waiver



Namaste!

Let's start your personal yoga journey with Springbank Hill Community Association (SBHCA). Please fill out this information form to help us get to know you. *(IMPORTANT: This form must be completed and submitted by each member of your household before attending SBHCA yoga sessions. Anyone in your household must be 18 years and older to participate.)*

* Required

Name *

Your answer

Email address *

Your answer

Phone number *

Your answer

I am 18 years or older (Yes or No) *

Your answer

Are you a current SBHCA member? (Yes or No) *

Your answer

Contact name & number in case of emergency *

Your answer

Are you new to yoga (Yes or No)? *

Your answer

If no, how many years have you studied yoga? *

Your answer

Please list any injuries and/or health concerns with details and severity. *

Your answer

Student Responsibility Agreement *

I agree that in-person and live-online classes I attend, and this form do not claim to treat any of the conditions listed above or any liability, loss, personal or otherwise, resulting from the yoga program. Yoga instruction is in no way intended as a substitute for medical counseling. The instructor does not diagnose illness or disease, I acknowledge that I have permission from my physician to practice yoga. The practice includes physical activity and therefore carries some risk of injury. I must judge my own capabilities and not exceed my limits. While the teacher will be able to further support the safety of my practice in the live-online and in-person formats, I agree to take full responsibility for any injuries that occur in the practice of yoga and to inform the instructor immediately if any injury occurs. I hereby waive and release any claim for injury or illness that I might have against the instructor or Springbank Hill Community Association.

I agree

**Please email back your completed form to
yoga@springbankhill.org**