



Teen Yoga Permission Slip

_____ has my permission to attend classes at Yoga Samadhi. I acknowledge that there are certain risks involved in the participation of activities related to exercise including, but not limited to yoga, Pilates and other multi-discipline classes. I hereby personally assume all risk in connection with the classes, including injuries or accidents incurred before, during or after class, arising from general use of the facility. I further release Yoga Samadhi, its owners, instructors, teachers, agents and operators for any injury or damage that may befall connected therewith, whether foreseen, or unforeseen, and further to save and hold harmless Yoga Samadhi, its owners, instructors, teachers, agents or operators from any claim by me, or my family, estate, heirs or assigns, arising out of enrollment and participation in classes with yoga Samadhi. I assume responsibility of physical fitness and capability to perform under the conditions of the classes offered at Yoga Samadhi.

In case of an emergency, I can be reached at _____ or _____

If I cannot be reached, please contact _____ at _____

Parent or Guardian Signature: _____ Date: _____

This permission slip is good for all regular scheduled classes at Yoga Samadhi. Please return to Yoga Samadhi upon enrollment, or first class. Visit www.columbiagorgeyoga.com to view class schedule.