



insideoutsideyoga.com

Heather Stanley

PRIVATE YOGA INSTRUCTOR

cell: (702) 339-7930

fax: (702) 248-8186

email: Heather@insideoutsideyoga.com

www.insideoutsideyoga.com

Inspired by Anusara Yoga™

Name: _____ Phone (H): _____
Address: _____ Phone (C/W): _____
City: _____ State: _____ Zip: _____
E-mail: _____ Birth date (mo/dd/yr): _____

Thank You

I have volunteered to participate in a program that includes progressive physical exercise. I waive any liability resulting from the possibility of personal injury which may be blamed upon such a program now and in the future and accept the responsibility for requesting such exercise and assistance. The possibility of certain unusual changes during exercise does exist. They include: abnormal blood pressure, fainting, disorders of the heart beat and in very rare instances, heart attack. Every effort will be made to minimize these effects by preliminary examinations and by observations during situations which may arise. I hereby acknowledge and accept these risks. To my knowledge, I do not have any limiting physical condition or disability that would preclude an exercise program.

I have been advised as with any physical workout a physician's examination should be obtained prior to involvement in the exercise program. I choose to not obtain a physical examination.

I accept complete responsibility for my health and well being in the voluntary exercise-fitness program and understand that no responsibility is assumed by the leader of the program at insideoutsideyoga or Diva Girlz.

Emergency Contact: _____ Relationship: _____
Phone (H) _____ (W) _____ (C) _____

Participant's Signature: _____ **Date** _____