Enjoying The Now Yoga & Advocacy Partners

Yoga Class Waiver and Release of Liability

Participant Name:	Date of Birth:
i ai deipant Name.	Date of Diftil.

Assumption of Risk

I understand that participation in Enjoying The Now Yoga classes involves physical activity, including stretching, balance, and movement. These classes are beginner-level, and modifications will be offered to support all ability levels. I understand that participation may involve inherent risks of injury, including but not limited to muscle strain, falls, or other physical harm.

Participation in these yoga sessions is voluntary and intended for community enjoyment and general wellness. Classes are offered by Enjoying The Now Yoga on a donation basis, and Advocacy Partners is only providing the space where the classes take place.

I agree to participate only to the extent that I feel comfortable and safe and to stop immediately if I feel pain, dizziness, or discomfort. I understand that Enjoying The Now Yoga and Advocacy Partners are not medical providers and do not offer medical advice. I will consult my physician, physical therapist (PT), occupational therapist (OT), or other health professional before participating.

Release and Waiver of Liability

In consideration of being permitted to participate, I hereby release, waive, and discharge Enjoying The Now Yoga, Advocacy Partners, their owners, instructors, employees, volunteers, and agents (collectively, "Released Parties") from any and all claims or causes of action for injury, illness, or damages arising out of my participation, whether caused by negligence or otherwise.

I further agree to indemnify and hold harmless the Released Parties from any loss, liability, or cost they may incur due to my participation.

Medical Authorization

In the event of an emergency, I authorize the instructors or representatives of Enjoying The
Now Yoga and Advocacy Partners to seek medical assistance at my expense.

Photo and Media Release (Optional)	
I understand that photos or videos may be take or promotional purposes. ☐ I consent to the use of my image, likeness, or Now Yoga and Advocacy Partners, without con ☐ I do not consent to the use of my image, like	r voice in photos or videos by Enjoying The appensation.
Acknowledgment	
I have read this document, fully understand its I am aware that I am waiving certain legal righ	
Severability	
If any portion of this agreement is held invalid, full legal force and effect.	the remaining provisions shall continue in
Governing Law	
This agreement shall be governed by and const of New Mexico.	trued in accordance with the laws of the State
Participant Signature:	Date:
Guardian Signature (if applicable):	Date:
Guardian Name (Print):	Relationship: