

INDYOGA LIABILITY WAIVER

Yoga and SUP Yoga provide great benefits for the body, but only you know your own body and limitations. Like any exercise, please consult a health care professional with any concerns before starting any exercise program. When participating in any exercise, there is always a possibility of physical injury, and not all postures are suitable for everyone. Please honour your body and respect your range of motion, considering pre-existing conditions or injuries.

Indyoga is not liable for any injury or accident to any individual participating in a class or using the techniques suggested. Indyoga is not a licensed medical care provider and acknowledges it has no expertise in diagnosing, examining, or treating medical conditions, or determining the effect of any specific exercise on an existing medical condition.

I hereby agree to the following:

1. I am participating in Yoga and SUP Yoga classes or any other exercise classes offered by Indyoga, during which I will receive information and instruction about Yoga, physical exercise or health. I recognise that exercise requires physical exertion, which may be strenuous and may cause physical injury, and I am fully aware of the risks and hazards involved.
2. I understand that it is my responsibility to consult a physician prior to and regarding my participation in the classes or courses offered at Indyoga. I represent and warrant that I am physically fit and I have no medical condition which I have not indicated on the Health & Fitness form, which would prevent my full participation in these classes, health programmes or workshops.
3. I will advise Indyoga on all known medical conditions, illness, injury and pregnancy in my PARQ questionnaire and also confirm any changes in the future and at the start of class.
4. If I am pregnant I understand that I participate fully at my own risk and that of my unborn child/children. If pregnant, it is up to you to notify the instructor, as some classes/postures may not be suitable during certain stages of pregnancy.
5. In consideration of being permitted to participate in the yoga classes, health programmes or workshops, I agree to assume full responsibility for any risks, injuries or damages, known or unknown, which I might incur as a result of participating in the programmes offered by my instructor or substitute teacher.
6. In further consideration of being permitted to participate in the classes and courses offered at Indyoga, I knowingly, voluntarily and expressly waive any claim I may have against my instructor or substitute teacher for injury or damages that I may sustain as a result of participating in these programmes.



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7. I understand fully that from time to time during classes the instructor may physically assist the student's form and posture. If I do not want such physical adjustments, I will so inform the instructor at the beginning of each class I attend. I also acknowledge that if I do wish to receive such assists, it is my responsibility to inform the instructor when an adjustment has gone as far as I desire at that time.

8. I agree that Indyoga is in no way responsible for the safekeeping of my personal belongings while I attend public group classes. I hereby take full and sole responsibility from any liability of loss or damage to personal property associated with yoga classes or any other events.

9. I understand that classes at Indyoga may at times be physically challenging and I attend classes at Indyoga entirely at my own risk. I accept that it is my responsibility to inform my teacher at the start of each and every class I attend at Indyoga of any injury or health condition that I may have, but that my teacher or Indyoga are in no way responsible for any worsening of any condition I may have as a result of attending a class at Indyoga.

10. I agree that neither I, my heirs, assignees or legal representatives forever release, waive, discharge and covenant not to sue or make any other claims of any kind against Indyoga or its employees for any personal injury, property damage/loss or wrongful death, caused by negligence or other acts.

I have read the above release and waiver of liability and fully understand its contents. I voluntarily agree to the terms and conditions stated above under my own free will.

Please complete your PARQ Health and Fitness Questionnaire and sign the declaration before returning the completed Health and Fitness form prior to taking a class.

