

Yoga & Tai Chi Liability Student Waiver Agreement

I, _____ (Print Name)
understand that yoga/Tai Chi includes physical movements as well as an opportunity for relaxation, stress, re-education and relief of muscular tension. As is the case with any physical activity, the risk of injury, even serious or disabling, is always present and cannot be entirely eliminated. If I experience any pain or discomfort, I will listen to my body, adjust the posture and ask for support from the teacher. I will continue to breathe smoothly.

Yoga/Tai Chi is not a substitute for medical attention, examination, diagnosis or treatment. Yoga/Tai Chi is not recommended and is not safe under certain medical conditions. I affirm that I alone am responsible to decide whether to practice yoga or Tai Chi. I hereby agree to irrevocably release and waive any claims that I have now or hereafter may have against the teaching staff of Balance on Buffalo, LLC. & Balance on Buffalo, LLC.

Signature of student, parent or guardian:

Date: _____

Email address: _____

Phone: _____

Ba**ss**ance

on Buffalo