



Release & Waiver of Liability

1. I am participating in the yoga classes, programs, or workshops offered by Revive Hot Yoga, LLC (“Revive”), during which I will receive information and instruction about yoga and health. I recognize that yoga classes are a voluntary activity and involve physical exertion that may be strenuous and may involve bodily risk. I am fully aware of the risks involved and will not perform any poses to the extent of strain or pain.
2. I understand that it is my responsibility to consult a physician prior to and regarding my participation in Revive’s classes, programs, workshops, etc. (“Activities”). I represent and warrant that I am physically fit and have no medical condition that would prevent my full participation in Revive’s Activities. I recognize that it is my responsibility to inform my instructor of any serious illness or injury before every yoga class.
3. If at any time classes or facilities appear unsafe, I will immediately notify an appropriate party.
4. I understand that, individually and on behalf of my heirs, assigns, personal representatives or any other associated party (“Relatives”), I agree to release, acquit and forever discharge Revive and/or its owners, employees, agents, officers, representatives, volunteers, the owner of the premises, all other related persons or entities, etc. (“Revive and Others”), from any and all liability whatsoever resulting from any damages, losses or injuries (including death) that might arise in any way out my activities. I/We assume all risk of injuries associated with participation including, but not limited to, falls, contact with other participants, the effects of high heat and/or humidity, and all other such risks being known and appreciated by me. In other words, if I am harmed in any way my Relatives and I are broadly agreeing to waive and forever extinguish the ability to seek damages from Revive and Others to the maximum extent permitted by Washington law. Additionally my Relatives and I agree to release, discharge and hold Revive and Others harmless from liability for injuries, illnesses, medical bills, damages, etc. incurred and in any way related to my Activities.
5. Revive is in no way responsible for the safekeeping of my personal belongings while I attend class. Revive and Others have no liability for loss or damage.
6. The above terms may not be modified orally and if any portion of this waiver and release is found to be invalid, the balance shall remain in full force and effect.

By voluntarily and knowingly signing below, I am acknowledging that, among other things, I have carefully read this entire release and waiver, understand its terms without reservation and, accordingly, my Relatives and I are waiving substantial legal rights.

Signature _____

Date ____-____-____

*If under 18, must have waiver signed by parent or guardian prior to first class.

Parent’s Signature _____

Date ____-____-____



New Student Registration

Please Print Clearly! ☺

Name _____ Gender M / F
First Last

Phone _____ Birth Date _____

Address _____
Street City State Zip

E-mail _____

(We will not share your e-mail with anyone. We will email receipts to you, notify you of specials, inform you of remaining sessions on your account, etc.)

How did you hear about us? (Check all that apply)

- Revive Client _____ Studio Sign
 Coupon/Ad Internet Newspaper Other _____

Emergency Contact

Name _____ Relation _____ Phone _____

Have you practiced yoga before? Y / N If yes, where and how long? _____

Are you pregnant? Y / N If yes, how far along? _____

What are your goals with Hot Yoga; what brought you here? _____

Please list any injuries, ailments or conditions: _____

If you are currently taking medications or have any serious allergies that should be known to medical personnel in case of an emergency, please indicate here: _____

Signature _____ **Date** _____