

YOGA PARTICIPATION AGREEMENT

Next Half Best Half LLC

Participant Information

Name: _____ Date: _____

Email: _____ Phone: _____

Agreement

I voluntarily choose to participate in yoga classes offered by Next Half Best Half LLC.

I understand and agree that:

- 1. Physical Activity:** Yoga involves physical movement and I am responsible for knowing my own physical limitations.
- 2. Personal Responsibility:** I will listen to my body, modify or skip any poses that don't feel right, and stop if I experience pain or discomfort.
- 3. No Medical Advice:** The instructor is not providing medical advice. I am responsible for consulting my healthcare provider before starting yoga if I have any health concerns.
- 4. Assumption of Risk:** I understand that physical activity carries inherent risks and I voluntarily assume all risks associated with my participation.
- 5. Release of Liability:** I release and hold harmless Next Half Best Half LLC, Ruth Anderson, and all instructors from any claims, injuries, or damages arising from my participation in yoga classes.

Participant Signature

Signature: _____

Print Name: _____

Date: _____

Next Half Best Half LLC

Ruth Anderson

ruthie@nexthalfbesthalf.com