



Preteen Yoga Class Waiver Form

Name: _____

Age: _____

Name of Parent/Guardian: _____

Address: _____

City : _____

Zip Code: _____

Mother's #: _____ Father's #: _____

Email Contact: _____

(We will not share your information)

Emergency Contact And Telephone Number:

Other: _____ Phone: _____ Relationship: _____

If the Child is currently experiencing any medical conditions (e.g. injury, asthma,) that the instructor should be informed of please specify here:

If the child is currently taking medications or has serious allergies that should be made known to medical personnel in case of an emergency, please indicate them here:

CHILD WAIVER (TO BE SIGNED BY THE ADULT PARENT OR GUARDIAN)

- 1.** I the undersigned parent or guardian, understand that Yoga is not a substitute for medical attention, examination, diagnosis or treatment. In the case where my child has an injury, sickness or anything else that may be affected by physical activity,
- 2.** I have consulted with physician to ensure my child can take yoga classes. I recognize that it is my responsibility to notify the instructor of any serious illness or injury before every yoga class.
- 3.** In further consideration of permitting my child to participate in the yoga classes, I knowingly, voluntarily and expressly waive any claim I may have against Bikram Yoga Pasadena and the owner of the premises for injury or damages that my child may sustain while on the premises as a result of participating in the Preteen yoga classes.
- 4.** 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. I accept that neither the instructor, nor the hosting facility is liable for any injury, or any damages, to person or property, resulting from the taking of the class.

Parent or Guardian/Signature

Date: _____

Bikram Yoga Pasadena
2089 E Colorado Blvd. Pasadena, CA 91107
626-304-9642

Photography Release

I, _____, give my permission to use my child's name, likeness, image, and/or appearance as such may be embodied in any pictures, photos, videos, digital images, and the like, taken or made on behalf of Bikram Yoga Pasadena. I agree Bikram Yoga Pasadena has complete ownership of such pictures, etc., including the entire copyright, and may use them for any purpose consistent the Bikram Yoga Pasadena mission. These uses include, but are not limited to illustrations, newsletters, exhibitions, videotapes, reprints, publications, advertisements, and any promotional or educational materials in any medium now known or later developed, including the Internet. I acknowledge that I will not receive any compensation, etc. for the use of such pictures, etc., and hereby release Bikram Yoga Pasadena and its agents and assigns from any and all claims which arise out of or are in any way connected with such use.

I have read and understood this consent and release.

I give my consent to Bikram Yoga Pasadena to use my child's name and likeness to promote their programs, and/or their activities.

Parent / Legal Guardian (if under age 18)

Date

I do not give my consent to Bikram Yoga Pasadena to use my child's name and likeness to promote their programs, and/or their activities.

Parent / Legal Guardian (if under age 18)

Date

Parent or Guardian/Signature

_____ **Date:** _____