

# **Saraswati: “Essence of Self “ Women’s Yoga Retreat**

Taught by Cheryl Walters & Julie Heppe

Juniper Wellness Ranch  
10080 W Tough Country Trail, Skull Valley, AZ

## **Agreement of release and waiver of liability assumption of risk**

I am participating in yoga classes offered by Cheryl Walters and Julie Heppe during which I will receive information and instruction about Yoga. I recognize that Yoga requires physical exertion, which may be strenuous and may cause physical injury, I am fully aware of the risks and hazards involved.

I understand that it is my responsibility to consult with a physician prior to and regarding participation in the yoga classes or workshops offered by the two above Yoga Teachers. I represent and warrant that I am physically fit and have no medical conditions that would prevent my full participation in the yoga classes.

In consideration of being permitted to participate in yoga classes I agree to assume full responsibility for any risks, injuries or damage, known or unknown, which I might incur as a result of participation.

In further consideration of being permitted to participate in yoga classes, I knowingly, voluntarily and expressly waive my claim I may have against Cheryl Walters and Julie Heppe for injury or damages that I may sustain as a result of participation, including claims of negligence.

I realize that not all yoga postures practiced in the class are suitable for me. I acknowledge that I am responsible for understanding the contradictions for my individual health issues. I agree to practice yoga within the range that is safe and suitable for me.

In consideration that I will also not hold any individual participating in a yoga class and or I will not hold Cheryl Walters or Julie Heppe responsible if I attend a class and contract the coronavirus.

I, my heirs, agents, assignees and legal representation forever release, waive, discharge, and covenant not to sue Cheryl Walters or Julie Heppe for any injury or death caused by negligence or other omissions or acts.

I have read and fully understand the above agreement and release and waiver of liability. By my signature below, I voluntarily agree to the terms and conditions above.

DATE:

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NAME (PRINTED):

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SIGNATURE:

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EMAIL ADDRESS:

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