



LIABILITY RELEASE

Name _____

Phone _____

Email _____

RELEASE FROM LIABILITY

In choosing to participate in yoga classes, and all other classes with Playful Hearts Yoga, I hereby agree to assume all risk of personal injury. I hereby hold harmless Playful Hearts Yoga LLC and its teachers and owner, Leslie Wolfe, from all liability, injury, or damage to myself.

Signature _____

Parent Signature _____

(if under 18)

Date _____

Please inform your teacher, prior to the beginning of class, of any medical condition you may have that might limit your ability to fully participate in the experience.

Cash or check made payable to Leslie Wolfe.

NAMASTE!