

I acknowledge the contagious nature of the Coronavirus/COVID-19 and that the CDC, WHO and the Canadian public health authorities both federal and provincial recommend to continue practicing social distancing. I further acknowledge that Ashtanga Yoga Vancouver Inc. has put in place preventative measures to reduce the spread of the Coronavirus/COVID-19. I further acknowledge that Ashtanga Yoga Vancouver Inc. cannot guarantee that I will not become infected with the Coronavirus/COVID-19. I understand that the risk of becoming exposed to and/or infected by the Coronavirus/COVID-19 may result from the actions, omissions, or negligence of myself and others, including, but not limited to, yoga studio staff, and other studio clients and their families.

I voluntarily seek services provided by Ashtanga Yoga Vancouver Inc. and acknowledge that I am increasing my risk to exposure to the Coronavirus/COVID-19. I acknowledge that I must comply with all set procedures by the yoga studio to reduce the spread while attending classes. By signing below, I agree: * I am not experiencing any symptoms of illness such as cough, shortness of breath or difficulty breathing, fever, chills, repeated shaking with chills, muscle pain, headache, sore throat, or new loss of taste or smell.

* I do not believe I have been exposed to someone with a suspected and/or confirmed case of the Coronavirus/COVID-19.

* I have not been diagnosed with Coronavirus/Covid-19 and not yet cleared as non contagious by state or local public health authorities.

* I am following all CDC recommended guidelines as much as possible and limiting my exposure to the Coronavirus/COVID-19.

*A valid form of my proof of the COVID-19 vaccination(s) has been presented prior to starting in-person classes at the Ashtanga Yoga Vancouver Inc.

I hereby release and agree to hold Ashtanga Yoga Vancouver Inc. harmless from, and waive on behalf of myself, my heirs, and any personal representatives any and all causes of action, claims, demands, damages, costs, expenses and compensation for damage or loss to myself and/or property that may be caused by any act, or failure to act of the yoga studio, or that may otherwise arise in any way in connection with any services received from Ashtanga Yoga Vancouver Inc.. I understand that this release discharges Ashtanga Yoga Vancouver Inc. from any liability or claim that I, my heirs, or any personal representatives may have against the studio with respect to any bodily injury, illness, death, medical treatment, or property damage that may arise from, or in connection to, any services received from Ashtanga Yoga Vancouver Inc.. I fully understand that this class is educational and I am solely responsible for my health, safety, and well-being while participating. I agree that I will inform my instructor of any activity which I cannot perform safely and I will not perform any activity which I feel is likely to cause me to injure myself. I agree to hold the instructor harmless from any and all responsibility for any injury that I may sustain during or as a result of my yoga class. This liability waiver and release extends to the yoga studio together with the owner and teachers.

Printed Name: _____ Date Signed: _____

Signature: