



## Dynamic Yoga and Fitness Studio *by Yoga 4 Love*

### Student Profile

Class Location / Date \_\_\_\_\_

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Phone #'s: hm \_\_\_\_\_ cell \_\_\_\_\_ Emergency Contact \_\_\_\_\_  
 Date of Birth: \_\_\_\_\_ Email Address PRINT: \_\_\_\_\_

Would you like to receive our monthly schedule and yoga updates via email?      No      Yes  
 How did you hear about us? \_\_\_\_\_ Have you practiced yoga before?      No      Yes

Please list and notify the yoga instructor of any previous or current health conditions or injuries

Hypertension or High Blood Pressure	No	Yes	_____
Lower Back Pain/Injuries	No	Yes	_____
Upper Back Pain/Injuries	No	Yes	_____
Neck Pain/Injuries	No	Yes	_____
Knee Pain/Injuries	No	Yes	_____
Wrist Pain/Injuries	No	Yes	_____
Glaucoma or other Eye Disorders	No	Yes	_____
Ear Congestion/Infection	No	Yes	_____
Sinuses or Allergies	No	Yes	_____
Arthritis	No	Yes	_____
Surgeries? Do you have any complications?	No	Yes	_____
Women only- Are you pregnant?	No	Yes	_____
Do you have midwife/ doctor's consent	No	Yes	_____

Comments: \_\_\_\_\_

### ***AGREEMENT OF RELEASE AND WAIVER OF LIABILITY***

HEARBY AGREE TO THE FOLLOWING:

Yoga Student, or Participant, is aware that participation in Yoga may result in accident or injury, and Participant assumes the risk connected with the participation in Yoga and represents that Participant is in good health and suffers from No physical impairment which would limit their safe participation in yoga class. Participant acknowledges that the yoga instructor has not and will not render any medical services including medical diagnosis of Participant's physical condition. Participant specifically agrees that yoga4love, its officers, employees and agents shall not be liable for any claim, demand, cause of action of any kind resulting from or related to Participant's use of the facilities where class is held or participation in any exercise or activity within or without the facility's premises, and buyer agrees to hold the yoga instructor harmless from same.

I have read above release and waiver of liability and fully understand its contents.

I voluntarily agree to the terms and conditions stated above.

SIGNATURE OF PARTICIPANT

Name \_\_\_\_\_ Date \_\_\_\_\_

*Expanding Our Horizons... Inspiring Positive Change*

469.467.1334      www.dynamicyogaandfitness.com