

COVID-19 & Yoga Liability Waiver

I acknowledge the contagious nature of Covid-19 and that the CDC and many other public health authorities still recommend practicing social distancing.

I further acknowledge that Gene Purdum and/or Living Arts Dance Studio cannot guarantee that I will not become infected with the Covid-19. I understand that the risk of becoming exposed to and/or infected by the Covid-19 may result from the actions, omissions, or negligence of myself and others, including, but not limited to, other class members.

I voluntarily seek services provided by Gene Purdum and/or Living Arts Dance Studio and acknowledge that I may be increasing my risk to exposure to the Covid-19. I acknowledge that I must comply with all set procedures to reduce the spread while attending my class.

I affirm that I have been vaccinated against Covid-19.

I affirm that if any of the following conditions exist, I will refrain from attending class:

- experiencing any symptoms of Covid-19 and/or the flu
- traveled internationally or to a highly infectious US location within the last 10 days.
- was exposed to someone with a suspected and/or confirmed case of the COVID-19.
- have been diagnosed with COVID-19 within the past 10 days.

I understand that yoga is not a substitute for medical attention, examination, diagnosis, or treatment. I also acknowledge that I should consult a physician prior to beginning any activity program, including yoga. I am encouraged to notify the instructor before class about any injuries or physical conditions that limit my movement. I will not perform any postures to the extent of strain or pain.

I accept that neither the instructor, Gene Purdum, nor the hosting facility, Living Arts Dance Studio, is liable for any injury, or damages, to person or property, resulting from the taking of the class. I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to myself (including, but not limited to, personal injury, disability, and death), illness, damage, loss, claim, liability, or expense, of any kind, that I may experience or incur in connection with my attendance at Living Arts Dance Studio.

By signing, I acknowledge my understanding of this statement and consent to its terms and conditions.

Name: (Printed) _____

Signature and Date _____