



Waiver and Release Form

Name: _____ Birthdate: _____ Age: _____

Congratulations on your pregnancy! How far along are you? _____

Address: _____ City: _____ State: _____

Phone: _____ Email: _____

Emergency Contact: _____ Relationship: _____ Phone Number: _____

Please acknowledge any physical injuries you have had: _____

I am participating in online prenatal yoga class or classes offered by Yoga with Colie Belieu. By signing below, I hereby agree and acknowledge the following: The classes are offered online by videos or virtual online platform. The classes will include, but not necessarily be limited to physical yoga postures and movements, breathwork, postural changes and relaxation. I understand, acknowledge and agree that, as is the case with any physical activity, the risk of injury, even serious or disabling, is always present and cannot be entirely mitigated or eliminated by Releasee notwithstanding their exercise of reasonable diligence. I affirm that I am pregnant or planning to become pregnant and my signature verifies that I have my physician's approval to participate in the classes. I understand that it is my responsibility to listen to my body, and that if I experience any pain or discomfort, I will immediately discontinue any activity. I assume full responsibility for myself and all personal injury or other damages, which I may experience through participation in the classes.

These yoga classes are not a substitute for medical attention, examination, diagnosis or treatment. Yoga is not recommended and is not safe under certain medical conditions. By signing, I affirm to the Releasee that a licensed physician has verified my good health and physical condition to participate in such a fitness program. In addition, I will acknowledge any of my medical conditions or physical limitations before class and affirm that I alone am responsible to decide whether I can practice yoga and participation is at my own risk. I hereby agree to irrevocably release and waive any claims that I have now or may have hereafter against the Releasee, Colie Belieu, or Yoga with Colie Belieu.

I have read and fully understand and agree to the above terms of this Liability Waiver Agreement. I am signing this agreement voluntarily and recognize that my signature serves as complete and unconditional release of all liability to the greatest extent allowed by law in the State of Utah and the United States.

Signature: _____ Date: _____

Please complete and return to Colie at coliebelieu@gmail.com