



**SAYBROOK SOUL SWEAT**  
**AGREEMENT OF RELEASE AND WAIVER OF LIABILITY**  
**PLEASE READ CAREFULLY THIS IS A LEGAL DOCUMENT**

I, \_\_\_\_\_ (Participant) acknowledge that I am freely entering into an agreement, to practice certain yoga classes and participate in certain programs, workshops and other yoga-related activities (the Services), with Saybrook Soul Sweat, LLC (SSS) (Agreement). I represent and warrant that I am in good physical health and that I do not suffer from any health or medical conditions which would limit my participation in the Services. I understand that it is solely my responsibility to advise an SSS instructor of any limitations that I may have prior to engaging in the Services. I understand that it is my responsibility to consult with a licensed health professional prior to and regarding my participation in any of the Services. I understand the risks associated with the Services and I agree to follow all instructions so that I may safely participate in the Services.

I acknowledge and understand that SSS has put in place preventative measures to reduce the spread of COVID-19 and other viruses and germs that may lead to infection (collectively Coronaviruses) including but not limited to: treating the SSS studio with [Permasafe](#), limiting class sizes to maintain social distancing in compliance with CT Guidelines, requiring masks be worn while participating in the Services, discontinuing the use of shared yoga props, and continuing to prioritize cleanliness sanitizing before and after any Services. I understand and acknowledge that Coronaviruses are contagious in nature, may be transmitted by person to person contact or in air droplets, and that SSS cannot guarantee that I will not become infected with Coronaviruses while participating in the Services even with the preventative measures outlined in this Agreement.

By signing this Agreement, I acknowledge the contagious nature of Coronaviruses and voluntarily assume the risk that I may be exposed to or infected by Coronaviruses by attending the studio and participating in the Services and that such exposure or infection may result in personal injury, illness, permanent disability, and/or death. I understand that the risk of becoming exposed to or infected by Coronaviruses at the studio may result from the actions, omissions, or negligence of myself or others, including but not limited to Participants, instructors, and/or employees.

I hereby WAIVE AND RELEASE AND AGREE TO HOLD HARMLESS SSS its owners, officers, employees, and instructors from any claim, demand, cause of action of any kind resulting from or related to my participation in the Services. In taking part in the Services at SSS, I understand and acknowledge that I am fully responsible for any and all risks, injuries, or damages, known or unknown, which might occur as a result of my participation before, during, or after engaging in the Services.

This Agreement supersedes and replaces any and all prior agreements, orally, or in writing and executed by and between Participant and SSS.

**I have read the above release and waiver of liability and fully understand its content. I am legally competent to sign and voluntarily agree to the terms and conditions of this Agreement. I certify and acknowledge that I am 18 years or older.**

**Date:** \_\_\_\_\_

**Printed Name of Participant:** \_\_\_\_\_

**Signature of Participant:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Signature of legal guardian if Participant is under the age of 18:** \_\_\_\_\_

**Emergency Contact Name & Phone:** \_\_\_\_\_