ENTWINED Student Information, Yoga Release and Waiver of Liability

Please fill-out, print, sign, and return this waiver to me via email (shelley.entwined@gmail.com) prior to your first class. Thank you!

Name_	Date of Birth
	City, State & Zip
	Email
Emergency Contact	
How did you hear about this class?	
	1?
	l list for Shelley Snodgrass, Entwined Studio? Yes No
,, , , , , , , , , , , , , , , , , , , ,	
I,	_, hereby agree to the following:
	otherwise record Activities and place such photographs and videos on its Website or social media plat-form. I hereby consent to participate in the Activities, I knowingly, voluntarily, and expressly waive any "Claim" (as defined below) I may have against the Teacher and any of Teacher's employees, independent contractors, or assistants (each, a "Released Party") that I may sustain as a result of participating in the Activities even if the Claim arises from the negligence of Released Party or anyone else
=	rtain legal rights my heirs, next of kin, executors, administrators, and assigns
may have against any Released Party.	5 5 , , , , , , , ,, .,
Signature of participant	Date
If participant is under 18: As legal guardian of	, I consent to the above Release and Waiver of Liability.

Signature of parent/guardian ______ Date _____