

Participant Registration Acceptance & Liability Waiver

200 Hour Yoga Teacher Training

Wild Abundant Life

Name _____

Address _____

Apt# _____ City _____ State _____ Zip _____

Phone _____ Email _____

Emergency Contact: _____ Phone # _____

I, the undersigned, fully understand and agree to the following:

1. I am participating in 200 Hour Teacher Training with Debbie Russo & Wild Abundant Life, LLC.
I recognize that any physical exertion may be strenuous & may cause injury.
2. I am fully aware of the risk and hazards involved and choose to move forward with this program. I understand that I may modify at any time and that I am responsible for my own choices with regards to exertion and how I move my body during this training.
3. I understand that it is my responsibility to consult with a physician prior to and regarding my participation in 200HR Teacher Training program.
5. I knowingly and voluntarily waive any claim I may have against The 200HR Teacher Training and it's facilitators for injury or damages that I may sustain as a result of participation in this program.
6. I agree to let The facilitators of 200HR Teacher Training use my photograph, video, and/or audio taken or recorded during class for any purpose they deem necessary.
7. **I have read pages 8-12 in my teacher training manual (provided by Wild Abundant Life LLC) and fully understand & agree to the school policies regarding ethics, student conduct, grading, dismissal & readmittance, refunds, student records, attendance, employment opportunities & conflict resolution.**

I have read the release and waiver of liability and fully understand its content. I voluntarily agree to the terms and conditions stated above.

Printed Name: _____ **Signature:** _____ **Date:** _____