

Yoga Within You, LLC

COVID-19 Waiver & Release Form

I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that I may be exposed to or infected by COVID-19 by attending classes and events with Yoga Within You, LLC and Civana Spa & Wellness Resort and that such exposure or infection may result in personal injury, illness, permanent disability, and death. I understand that the risk of becoming exposed to or infected by COVID-19 with Yoga Within You, LLC or Civana Spa & Wellness Resort may result from the actions, omissions, or negligence of myself and others, including, but not limited to, Yoga Within You, LLC teachers, Civana staff, and other participants and students. 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 with Yoga Within You, LLC & Civana Spa & Wellness Resort.

On my behalf I hereby release, covenant not to sue, discharge, and hold harmless Yoga Within You, LLC & Civana Spa & Wellness Resort, its employees, teachers, and representatives, of and from the Claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto. I understand and agree that this release includes any Claims based on the actions, omissions, or negligence of the Yoga Within You, LLC and Civana Spa & Wellness Resort, its employees, teachers, and representatives, whether a COVID-19 infection occurs before, during, or after participation in any event or class held with Yoga Within You, LLC and Civana Spa & Wellness Resort.

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

Signature: _____

Date: _____