



A weekend Yoga Retreat with Jenny & Silke
"TAKING A STEP BACK"
2024, August 23-25
at Living River in Montevallo, Alabama, USA



Registration Form

Full Name :

Nickname :

Date of Birth : / /

Email :

Phone :

Street :

City :

Zip Code :

Emergency Contact :

Name :

Phone :

Please list any allergies you have, including food :

Any health limitations or physical injuries we should know about :

How long have you been practicing Yoga?

Not at all

Six months to one year

More than one year

Where did you hear about this retreat?

What inspired you to come to this retreat?



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AGREEMENT OF RELEASE AND WAIVER OF LIABILITY

I hereby agree to the following:

As I participate in activities offered by the hosts and special guests, I understand that the offerings of this retreat are not a substitute for medical attention, examination, diagnosis, or treatment.

I will receive fitness-related information and instructions. I recognize that all exercise programs require physical exertion that may be strenuous and may cause physical injury and I am fully aware of the risks and hazards.

If at any time during the activities, I feel discomfort or pain, I will inform and seek assistance from the teacher.

I may rest at any time during the class and over the weekend. I will listen to my body and respect its limits on any given day.

I understand that it is my responsibility to consult with a physician before and regarding my participation in any activity program. I represent and warrant that I am physically fit and I have no medical condition that would prevent my participation in fitness classes or workshops.

I recognize that it is my responsibility to notify my teacher of any serious illness or injury before every class.

I accept that neither the instructors, nor the hosting facility, are liable for any injury, or damages, to person or property, resulting from my participation in this retreat.

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

Date

Signature

THANK YOU FOR YOUR REGISTRATION!

CONTACT INFORMATION

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