

COVID-19 LIABILITY WAIVER

If you attend classes at Yoga from the Hart, you acknowledge and agree to the following.

I acknowledge the contagious nature of the COVID-19 and public health authorities recommend practicing physical distancing.

I acknowledge that Yoga from the Hart has put in place preventative measures to reduce the spread of the COVID-19.

I acknowledge that Yoga from the Hart cannot guarantee that I will not become infected with the COVID-19.

I understand that the risk of becoming exposed to and/or infected by the COVID-19 may result from the actions, omissions, or negligence of myself and others, including, but not limited to, studio staff, and other studio clients and their families.

I voluntarily seek services provided by Yoga from the Hart and acknowledge that I am increasing my risk to exposure to the COVID-19. I acknowledge that I must comply with all set procedures to reduce the spread while attending a yoga class.

I attest that:

- I am not experiencing any symptom such as cough, shortness of breath or difficulty breathing, fever, chills, muscle pain, headache, sore throat, or new loss of taste or smell

- I have not traveled internationally within the last 14 days

- I have not been exposed to someone with a suspected and/or confirmed case of COVID-19, nor have I been diagnosed with COVID-19

- I am following all WorkSafeBC recommended guidelines and limiting my exposure to the COVID-19

I hereby release and agree to hold Yoga from the Hart harmless from, and waive on behalf of myself, my heirs, and any personal representatives any and all causes of action, claims, demands, damages, costs, expenses and compensation for damage or loss to myself and/or property that may be caused by any act, or failure to act of the studio, or that may otherwise arise in any way in connection with any services received from Yoga from the Hart.

I understand that this release discharges Yoga from the Hart from any liability or claim that I, my heirs, or any personal representatives may have against the studio with respect to any bodily injury, illness, death, medical treatment, or property damage that may arise from, or in connection to, any services received from Yoga from the Hart.

Name: _____

Signature: _____

Date (MM/DD/YY): ____/____/____