

Children's Isha Yoga Residential Program

Release and Hold Harmless

Child's Name: _____

I have read this form carefully. I hereby enroll my minor child/ward in the Children's Isha Yoga Residential Program, July 8 - 12, 2008. I understand that the program will include indoor and outdoor activities. On behalf of my minor child/ward, I voluntarily assume the risks of personal injury, property damage or loss related to my minor child/ward's participation in the program. I hereby release, waive and discharge Isha Foundation and its agents, servants, employees, and volunteers, including the owners of the property where the program takes place, from any and all liability, claims, demands, actions and causes of action arising out of or related to any loss, damage or injury that may occur and/or may be sustained by my minor child/ward arising out of their participation in the program. Further, I as parent/guardian of a minor child, permit Isha Foundation and its volunteers to arrange such emergency care as it may deem necessary, in the event of any injury or illness that may occur during the program activities, if I can not be contacted. I also understand that all incurred costs are my responsibility and that Isha Foundation does not have medical insurance coverage for injuries to participants.

Parent/Guardian's signature

Date

MEDICAL ATTENTION DUE TO FEVER, COLD SYMPTOMS OR MINOR INJURIES

Child's Name: _____

I have read this form carefully. I hereby enroll my minor child/ward in the Children's Isha Yoga Residential Program, July 8 - 12, 2008. On behalf of my minor child/ward, I willingly give permission for the staff to dispense medications if illness should occur (fever, allergies, or cold symptoms) or attend to minor injuries should they occur – cleaning and dressing of abrasions or cuts and splinters.

Parent/Guardian's signature

Date