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YOGA WAIVER

I am happy you've made the decision to integrate yoga into our work together. We hold our emotions and our past experiences not only in our minds, but in our bodies as well. The healing benefits of yoga are profound. Though the yoga we will be doing together will be extremely gentle, when doing anything physical in nature, there is always the possibility that our bodies could sustain an injury, muscle soreness/stiffness/strain, or physical pain. In signing this waiver, you agree to not hold liable myself, Nityda Gessel, LCSW-E-RYT and Mind-Body Psychotherapy, PLLC for any physical injury, muscle soreness/stiffness/strain, or physical pain that could occur as a result of integrating yoga and gentle movement into our work together. It will always be your choice to incorporate yoga into our work and you can decide not to do so at any time. Please initial next to each statement and sign all sheets of this waiver. Thank you!

_____ I have consulted a medical doctor or licensed medical health care practitioner regarding any physical or medical-related health conditions. I have reported all physical and medical conditions to Nityda Gessel, LCSW, E-RYT and Mind-Body Psychotherapy, PLLC.

_____ I realize it is solely my responsibility to keep Nityda Gessel, LCSW, E-RYT and Mind-Body Psychotherapy, PLLC updated on any changes in my physical health and I understand that Nityda Gessel, LCSW, E-RYT and Mind-Body Psychotherapy, PLLC shall not be liable should I fail to do so.

_____ I have been informed and understand that physical exercise has been associated with certain risks, including but not limited to musculoskeletal injuries, abnormal blood pressure responses, and, in rare instances, heart attack or death. Every effort will be made by Nityda Gessel, LCSW, E-RYT and Mind-Body Psychotherapy, PLLC to minimize these risks. If at any time I have questions concerning my physical and emotional health and/or the yoga practices provided by Nityda Gessel, LCSW, E-RYT and Mind-Body Psychotherapy, PLLC I will address these concerns with the aforementioned parties directly.

_____ This agreement applies to personal injury (including death) from accidents or illness arising from the participation in physical activities including, but not limited to, yoga therapy, yoga classes, private yoga sessions, workshops, group yoga, and individual use of facilities, premises or equipment

_____ In addition, I release, discharge and waive any and all responsibility of Nityda Gessel, LCSW, E-RYT and Mind-Body Psychotherapy, PLLC from ordinary negligence. I hold harmless, Nityda Gessel, LCSW, E-RYT and Mind-Body Psychotherapy, PLLC.

Name (print): _____

Signature: _____

Date: _____