

Children's Yoga Program at Hilltop Farm

Children's Yoga Program is appropriate for children ages 4 and up. This camp will run daily for five days for three hours a day. We will perform a yoga vinyasa flow sequence for 30 minutes at the start of camp to warm up our bodies. We will also practice breathing exercises and calming tactics. We will read children's books about peace, meditation and yoga. Children will create correlating art projects that affirm themes from the readings. We will engage in yoga hikes around the Hilltop Farm property, practicing yoga and mindfulness in the natural setting. We will also play various yoga-themed games. Children will have time for snacks, please provide one from home.

July 9 through July 13 from 9 a.m. to 12 p.m. \$150 per child.

Children's Yoga Program

Child's Name

Age

Parent/Guardian Name

Mailing Address

E-mail Address

Please make checks payable to Allison Zaczynski
PO Box 372, Suffield, CT 06078

E-mail fit.blisswithallison@gmail.com to pay with credit card

Call (860)212-2234 with questions or e-mail fit.blisswithallison@gmail.com

FITNESS LIABILITY WAIVER

I, _____, hereby agree to the following:

1. That I am ready to participate in the exercises, fitness program, Yoga Classes, or any fitness program that I want to participate.
2. I understand that I will take all of the responsibilities and consult my own doctor related to my participation in any fitness program. I can make sure that I am physically healthy and I have no medical condition that may prevent my program participation
3. I have already got a permission to participate in any fitness class and I agree to take full responsibility for any risks, damages, injury, accident, and any bad things which I may get a result of participating in this program.
4. I am sure that I have got permission to participate in any fitness program I voluntarily, knowingly, and expressly waive any claim I may have against the instructor, owner or insurer or any Yoga fitness instructor for damages and injury that may occur during the program.
5. I, on my legal representatives' forever release, discharge, waiver, and covenant for not to sue the instructor, trainer, or owner any injury or death caused by their acts.

I, _____, have enrolled in the personalized health and fitness program offered through Retreat Yourself Wellness/Fit-Bliss with Allison/Allison Zaczynski. I recognize that the program may involve strenuous physical activity including, but not limited to, muscle strength and endurance training, cardiovascular conditioning and training, and other various fitness activities. I hereby affirm that I am in good physical condition and do not suffer from any known disability or condition which would prevent or limit my participation in this exercise program. I acknowledge that my enrollment and subsequent participation in purely voluntary and in no way mandated by Retreat Yourself Wellness/Fit-Bliss with Allison/Allison Zaczynski.

In consideration of my participation in this program, I, _____, hereby release Retreat Yourself Wellness/Fit-Bliss with Allison/Allison Zaczynski and its agents from any claims, demands, and causes of action as a result of my voluntary participation and enrollment. I fully understand that I may injure myself as a result of my enrollment and subsequent participation in this program and I, _____, hereby release Retreat Yourself Wellness/Fit-Bliss with Allison/Allison Zaczynski and its agents from any liability now or in the future for conditions that I may obtain. These conditions may include, but are not limited to, heart attacks, muscle strains, muscle pulls, muscle tears, broken bones, shin splints, heat prostration, injuries to knees, injuries to back, injuries to foot, or any other illness or soreness that I may incur, including death.

I HEREBY AFFIRM THAT I HAVE READ AND FULLY UNDERSTAND THE ABOVE STATEMENTS.

_____ (Participant Signature)

_____ (Date)