

Workshop Liability Waiver

I hereby agree to the following:

1. I am participating in a form of exercise whereby I may experience physical exertion, which may cause physical injury, and I am fully aware of the risks and hazards involved.
2. I understand that it is my responsibility to consult with a doctor prior to and regarding my participation in this workshop and that I have no medical condition that would prevent my participation in this activity.
3. I agree to assume full responsibility for any risks, injuries or damages, known and unknown, which I might incur as a result of participating in this workshop.
4. I knowingly, voluntarily, and expressly waive any claim I may have against the instructor, the owner, or the leaseholder of the building for injuries or damages that I may sustain as a result of participating in this workshop with Chloe Newman Yoga or other facilitator.

Sound therapy

Sound therapy can be very powerful & affect our bodies on a cellular level. Often people report feeling relaxed & a sense of physical & mental healing. However, there are times when Gong baths may not be suitable. These include:

- Acute/Serious Mental illness or Addiction. It's safer to consider a 121 session so a safe space can be held for the individual outside of a group.
- Metal implants. Including pacemakers.
- Tinnitus. For some it can aggravate the condition & for others it can alleviate.
- Pregnancy.
- Epilepsy. 121 only to be considered.

I hereby agree that:

- I am fully aware of the potential risks highlighted above.
- I understand that it is my responsibility to consult with a doctor prior to and regarding my participation in this workshop and that I have no medical condition that would prevent my participation.

Initial

****PLEASE READ CAREFULLY****

I have read and understood the contraindications with sound therapy. I understand that I alone am responsible for informing my primary health care provider I am receiving sound healing therapy in this workshop and inquiring as to whether or not it may adversely affect my current health condition. I have discussed any sound therapy health questions or concerns with my primary health care provider and so I understand that I am wholly and entirely responsible for determining if I should participate in this workshop. I will update the workshop practitioner of any changes to my health status. I understand that sound therapy facilitators do not diagnose illness, disease, or physical or mental disorders, nor do they prescribe medical treatments or pharmaceuticals.

Covid compliance

I acknowledge that Chloe Newman Yoga or other facilitator cannot guarantee that I will not become infected with the Coronavirus/Covid-19. I understand that the risk of becoming exposed to and/or infected by the Coronavirus/COVID-19 may result from the actions, omissions, or negligence of myself and others, including, but not limited to, Chloe Newman Yoga, another workshop facilitator, their clients and their families.

I voluntarily attest that:

* I am not experiencing any symptoms of illness such as cough, shortness of breath or difficulty breathing, fever, chills, repeated shaking with chills, muscle pain, headache, sore throat, or new loss of taste or smell.

* I have not travelled to a highly impacted area within the UK in the last 14 days.

* I do not believe I have been exposed to someone with a suspected and/or confirmed case of the Coronavirus/COVID-19.

* I have not been diagnosed with Coronavirus/Covid-19 and not yet cleared as non contagious by state or local public health authorities.

*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.

I agree to let Chloe Newman know my medical conditions and/or injuries prior to attending classes or workshops.

Initial