



BACKEDBYBEES

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Yoga & Meditation Teacher, E-RYT 500 & YACEP
www.shaninedennill.com

WAIVER & RELEASE

I attest that I have no psychological, medical, or emotional condition that would prevent me from safe participation in any yoga class/event.

Even with clear instruction, I acknowledge that there is the possibility of injury. It is my responsibility to consult a physician regarding my ability to participate before doing these activities with Shanine Dennill at Backed By Bees.

Classes/events are not substitutes for medical advice, diagnosis, or treatment. For information pertaining to my personal needs, I will see a qualified healthcare professional. If I am struggling with a mental health emergency, I will contact my family physician, a licensed therapist, or the hospital.

As a yoga and meditation teacher and trainer, Shanine Dennill does not diagnose conditions, prescribe or perform medical treatments, prescribe substances, or interfere with the treatment of licensed medical professionals.

I release and discharge Shanine Dennill, Backed By Bees, and associated and affiliated companies, from all liability, claims, demands, or actions that my heirs or I may make resulting from injury, illness, death, expenses, or damages arising from my participation in any yoga class/event, including losses caused by the negligence of the released parties.

I recognize that this agreement of release and waiver of liability is a legal contract and that I have complete knowledge of its contents. I have read this agreement and fully understand its contents and meaning and sign it of my own free will.

First & Last Name

Signature

Date (mm/dd/yyyy)

If participant is under the age of 18 years:

I, _____ (Guardian's full name) as the legal guardian of _____ (minor), hereby consent to the above conditions on his/her behalf.

First & Last Name

Signature

Date (mm/dd/yyyy)