



Participant Waiver

I am the parent or legal guardian of the Participant. I agree that the Participant may participate in the On My Mat program. The purpose of the program is to promote leadership skills, self esteem, and self awareness through small group lessons and yoga. I understand that during the program, the Participant will be involved in yoga and other physical activity. Medical consequences can occur as a result of participation in physical activity. While On My Mat takes all reasonable precautions, we can make no guarantees regarding these and other risks. Recognizing the risks of the program, and in consideration for allowing the Participant to participate in the program, I hereby release, discharge and agree to hold harmless, and to indemnify On My Mat and its owners, directors, officers, contributors, sponsors, employees, contractors, agents and assigns against and from any causes of action, claims, demands, damages, costs, loss of services, expenses, compensation, all consequential damages and attorney's fees (regardless whether pursuant to the laws of any county, state or country) claimed by, through or on behalf of me or the Participant related directly or indirectly to the program (including without limitation the culminating yoga event), and specifically including any and all claims for personal injuries sustained while participating in program activities without regard to negligence or negligent conditions.

In addition, I hereby authorize On My Mat, if after a reasonable attempt has been made to reach a parent, guardian or emergency contact to obtain consent, or if sound medical practice decrees that there is not time to make such an attempt, to consent to any x-ray examination, anesthetic, dental, medical or surgical diagnosis or treatment, and hospital care, to be rendered to the Participant under the general or special supervision and on the advice of any physician or surgeon who may treat the Participant, and consent to any x-ray examination, anesthetic, dental, medical or surgical diagnosis or treatment and hospital care, to be rendered to the Participant by any healthcare professional who may treat the Participant. I agree to pay for any such treatment and to reimburse On My Mat for all costs and expenses it may incur related to such treatment.

I hereby grant On My Mat, any On My Mat sponsors, and all assigns, licensees, successors in interest, legal representatives, employees, consultants, and those acting with permission or authority of the aforementioned parties, the absolute, irrevocable and unrestricted right to use photographs, videos likeness and audio (including without limitation all originals, negatives, prints and transparencies or any duplicates or reproductions of the foregoing) that have been or will be taken of the Participant (collectively, "Images"), in which the Participant may be included with others, to copyright the same, in the name of On My Mat or otherwise; to use, re-use, publish and republish the same in whole or in part, individually or in conjunction with other photographs and videos, and in conjunction with any printed matter, in any and all media now and hereafter known, and for any purpose whatsoever.

I hereby release and agree to hold harmless On My Mat and all aforementioned entities, from any damages or liability relating to or arising from any use of or modification, alteration, distortion or other change to any of the Images and/or information gathered, unless it can be proven that such reproduction were maliciously caused, produced and published for the sole purpose of subjecting Participant to conspicuous ridicule, scandal, reproach, scorn and indignity. I hereby waive any claims I may have based on any usage of the Images, information gathered, or works derived thereof, including but not limited to claims for either invasion of privacy or libel. I represent, warrant and agree that the Participant will not disaffirm or disavow this release on the ground that the Participant was a minor on the date it is executed or any similar grounds whatsoever.

I understand that my daughter may complete a confidential survey at the beginning and conclusion of the program. The survey assesses thoughts, feelings, and behaviors related to physical activity, self, and peers. This information will enable On My Mat to determine whether improvements have occurred over the course of the season. No names will be included on the surveys; rather, a code number will be assigned to each girl that will only be known by On My Mat.

I expressly agree that this consent is intended to be as broad and inclusive a release of liability as permitted by applicable law and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect. I hereby warrant and represent that I am 18 years old or older; I have carefully read this consent and agree to its terms and conditions, that before signing this agreement I had the chance to ask questions; and I am aware that by signing this consent, I assume all risks and waive and release certain substantial rights that I and participant may have or possess against On My Mat. To the extent permitted by applicable law, I hereby irrevocably and unconditionally waive trial by jury in any legal action or proceeding related to this agreement.

I have fully read the permissions and releases listed above, understand them, and I expressly agree to them. I hereby certify that there are no contraindications to the Participant's participation in the On My Mat program. I am the parent or legal guardian of the Participant, and this permission and release is binding on me and my executor, administrators and heirs.

Signature of Parent/Legal Guardian

Date

Printed Name of Parent/Legal Guardian

Printed Name of Participant

Participant DOB