



## Waiver of Liability, Release and Assumption of Risk

I, \_\_\_\_\_ hereby agree to the following:

- 1) Participant hereby acknowledges and understands that they will be participating in sessions or programming offered by Rustic Mama Retreats. These sessions may require physical exertion that may be strenuous and may cause physical injury. Participant is fully aware of the risks and hazards involved.
- 2) Participant hereby acknowledges and understands that some sessions may involve the risk of injury and/or death. These risks and dangers may be caused by the negligence of the participant or the negligence of others. By participating in such activities, the participant expressly assumes all the risks, consequences and liability related to these activities.
- 3) If participant is pregnant or has known medical conditions that might affect their participation in workshops, sessions or activities, they understand that they must take the necessary steps to ensure their doctor and health care providers know they are participating in this Retreat. Participant asserts that they are fit to participate in the Retreat activities and will alert all instructors whose sessions they participate in of any pregnancy or important medical concerns.
- 4) Participant, their heirs and legal representatives hereby release, forever discharges and holds harmless Rustic Mama Retreats, its officers and directors, employees, agents and volunteers, as well as the Retreat Venue, it's officers and directors, employees, agents and volunteers from all actions, causes of action, injuries or death, claims, negligence, costs or expenses arising out of or related to any activities.
- 5) Participant understands that this is a full and complete release of all injuries and damages, which may be sustained as a result of my participation in activities, workshops or sessions offered through Rustic Mama Retreats.
- 6) Participant also hereby consents to and authorizes the reproduction, publication, and use by Rustic Mama Retreats and its Owner for advertising, commercial, or any other purposes, of any photograph, video or likeness of the participant.

Participant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Participant Name: (print) \_\_\_\_\_ Phone Number: \_\_\_\_\_

Witness Signature: \_\_\_\_\_ Date: \_\_\_\_\_