



_____	_____
<b>first name</b>	<b>last name</b>
_____	_____
<b>address and apt. number</b>	<b>city / state / zip code</b>
_____	_____
<b>phone number / cell phone</b>	<b>e-mail address</b>
_____	_____
<b>emergency contact name</b>	<b>emergency contact phone #</b>
_____	_____
<b>date of birth</b>	
_____	
<b>date of workshop or retreat and location</b>	
_____	

**How long have you been practicing yoga for? \_\_\_\_ months \_\_\_\_ years \_\_\_\_ times per week**

**Are you familiar with or currently practicing Vinyasa Flow Yoga? \_\_\_\_ yes \_\_\_\_ no**

**How did you hear about this workshop or retreat?**

\_\_\_\_\_

**Describe your personal practice and why you would like to take this workshop or retreat?**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Describe your current health condition in detail including pregnancy (# of months), injuries (specify), any medical conditions or medication(s) including the effects of medication:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Application submission & Payment:** Please submit this application to Jennifer Barone in person, by mail or e-mail at baronejenn@gmail.com complete with signature. Payments can be made at innerlotus.com through PayPal or by check or money order to: Jennifer Barone 566 Vallejo Street, #19, San Francisco, CA 94133.

**Release:** Yoga instruction through Inner Lotus and its instructor, Jennifer Barone ("Releasee") are designed for students who are generally in good health. Yoga and yoga therapy are designed to be an integral part of a total wellness program and not intended to take the place of health care provided by a doctor. I acknowledge that I have spoken to my doctor or health care provider before taking part in lessons through Inner Lotus and its instructors or before starting a yoga practice at home. I acknowledge and understand that a risk of personal injury may be involved in any exercise program. I understand and accept that in order to properly teach and correct yoga technique, physical contact in a professional manner between student and instructor may be necessary. I consent to such contact as is considered necessary by the instructor or will accept responsibility for notifying the instructor(s) of my concerns about such physical contact prior to engagement of lessons through Inner Lotus and its instructors. By signing this document, I release Inner Lotus yoga and its instructor ("Releasee") from all liability to me for any loss or damage to property or injury or death to person, whether caused by Releasees or otherwise and while I am in or near my residence or the residence of Inner Lotus and its instructors. I agree not to sue Releasee for any loss, damage, injury or death described above and I will indemnify and hold harmless Releasee from any loss, liability, damage or cost they may incur due to my presence in the place of instruction (in and around the West Point Inn) or in my residence whether caused by the negligence of Releasees or otherwise. I understand that I am entitled to no refunds, credits or adjustments for any reason. I assume full responsibility for, and risk of, bodily injury, death or property damage due to the negligence of Releasees or otherwise. I acknowledge that I have read and understand this document and I voluntarily sign this document.

_____	_____	_____
<b>student's printed name</b>	<b>student's signature</b>	<b>today's date</b>