

# AYURVEDIC DETOX CHALLENGE

## RELEASE AND WAIVER OF LIABILITY AGREEMENT

I, \_\_\_\_\_ (“Participant”), acknowledge that I have voluntarily applied to participate in the **Ayurvedic Detox Challenge from April 22-28, 2017** at **my home** organized by **Mukthi**.

**NOTICE:** If you have any chronic ailment, heart problems, and physical disabilities or if you are pregnant, please consult your physician before you participate in these events. The coordinators of this program are not medical practitioner and he/she is just sharing his knowledge and experience of Ayurveda and Yogic practices.

By checking this box I agree to the terms and conditions listed here: I AM AWARE THAT I COULD BE INJURED BY THESE ACTIVITIES. I AM VOLUNTARILY PARTICIPATING IN THESE ACTIVITIES WITH KNOWLEDGE OF THE DANGER INVOLVED, AND AGREE TO ASSUME ANY AND ALL RISKS OF BODILY INJURY OR MENTAL DAMAGE, WHETHER THOSE RISKS ARE KNOWN OR UNKNOWN.

I verify this statement by placing my initials here: \_\_\_\_\_

As consideration for being permitted by the event organizer Mukthi, and any lessor of the event premises (“Lessor”), to participate in these activities and use the event premises and facilities, I forever release the event organizer Mukthi, the Lessor, any Mukthi affiliated organization, and their respective directors, officers, employees, volunteers, agents, contractors, and representatives (collectively “Releasees”) from any and all actions, claims, or demands that I, my assignees, heirs, distributees, guardians, next of kin, spouse and legal representatives now have, or may have in the future, for injury, death, or property damage, related to (i) my participation in these activities, (ii) the negligence or other acts, whether directly connected to these activities or not, and however caused, by any Releasee, or (iii) the condition of the premises where these activities occur, whether or not I am then participating in the activities. I also agree that I, my assignees, heirs, distributees, guardians, next of kin, spouse and legal representatives will not make a claim against, sue, or attach the property of any Releasee in connection with any of the matters covered by the foregoing release.

By checking this box I agree to the terms and conditions listed here: I HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN ME AND THE EVENT ORGANIZER, AND SIGN IT OF MY OWN FREE WILL.

Phone: (\_\_\_\_\_) - \_\_\_\_\_

Email: \_\_\_\_\_

**Emergency Contact:** Name: \_\_\_\_\_

Relationship: : \_\_\_\_\_

Phone: (\_\_\_\_\_) - \_\_\_\_\_

Participant’s Signature: \_\_\_\_\_ Date: \_\_\_\_\_