

CORAL SPRINGS COMMUNITY REDEVELOPMENT AGENCY

Yoga Class Release of Liability Form

Participant Name: _____ Date: _____

Street Address: _____

Daytime Phone: _____ Email Address: _____

NOTICE TO THE MINOR CHILD'S NATURAL GUARDIAN

READ THIS FORM COMPLETELY AND CAREFULLY. YOU ARE AGREEING TO LET YOUR MINOR CHILD ENGAGE IN A POTENTIALLY DANGEROUS ACTIVITY. YOU ARE AGREEING THAT, EVEN IF THE CORAL SPRINGS REDEVELOPMENT AGENCY AND/OR THE CITY OF CORAL SPRINGS USE REASONABLE CARE IN PROVIDING THIS ACTIVITY, THERE IS A CHANCE YOUR CHILD MAY BE SERIOUSLY INJURED OR KILLED BY PARTICIPATING IN THIS ACTIVITY BECAUSE THERE ARE CERTAIN DANGERS INHERENT IN THE ACTIVITY WHICH CANNOT BE AVOIDED OR ELIMINATED. BY SIGNING THIS FORM YOU ARE GIVING UP YOUR CHILD'S RIGHT AND YOUR RIGHT TO RECOVER FROM THE CORAL SPRINGS REDEVELOPMENT AGENCY AND/OR THE CITY OF CORAL SPRINGS IN A LAWSUIT FOR ANY PERSONAL INJURY, INCLUDING DEATH, TO YOUR CHILD OR ANY PROPERTY DAMAGE THAT RESULTS FROM THE RISKS THAT ARE A NATURAL PART OF THE ACTIVITY. YOU HAVE THE RIGHT TO REFUSE TO SIGN THIS FORM, AND THE CORAL SPRINGS REDEVELOPMENT AGENCY AND/OR THE CITY OF CORAL SPRINGS HAS THE RIGHT TO REFUSE TO LET YOUR CHILD PARTICIPATE IF YOU DO NOT SIGN THIS FORM.

The undersigned, being over the age of eighteen (18) years, and as a Participant or the Parent of Legal Guardian of a minor Participant ("Minor Child"), hereby acknowledges that I have inspected the Yoga 4 Life, Inc., yoga class (the "Class"), offered by an independent individual or independent contractor at the ArtWalk or other area designated by the CRA (the "ArtWalk"). I understand and acknowledge that the individual or entity offering the Class is an independent contractor of the Coral Springs Community Redevelopment Agency (the "CRA"). In consideration of the permission granted me to avail myself of the Class offered by the Contractor at the ArtWalk, I hereby release, waive, indemnify and hold harmless the CRA and the City of Coral Springs, and their officers, officials, agents, and employees from any and all liabilities, claims, demands, actions, suits, or judgments for loss, damage, injury that I, my Minor Child, or my family may sustain by reason or arising out of or in connection with my or my Minor Child's acts or omissions, negligence, participation in the Class, or use of the ArtWalk or the acts, omissions or negligence of the CRA or the City of Coral Springs, and their respective officers, officials, agents and employees. I fully acknowledge and understand that I am fully responsible for my acts, omissions, and negligence, and the acts, omissions and negligence of my Minor Child.

I am also fully aware of the dangers and risks, foreseen and unforeseen, known and unknown, of injury inherent in my and my Minor Child's use of the ArtWalk and participation in the Class. I understand that Class participation can be dangerous and that the CRA recommends and requests that I consult with my physician with respect to any past or present illness or injury that may affect my or my Minor Child's participation in or ability to engage in exercise and activities at the ArtWalk. I further understand that I am financially responsible for any damages incurred by the Coral Springs Community Redevelopment Agency or the City of Coral Springs and caused, in whole or in part, by myself or my Minor Child using the ArtWalk.

I have read, understand, and agree to comply with and abide by all provisions pertaining to the ArtWalk as set forth in any local rules, regulations and ordinances.

In signing below, I am acknowledging that I have read and understand the entirety of this Yoga Class Release of Liability Form.

WITNESS:

Print Name

Participant Signature (or Parent or Legal
Guardian Signature if Participant is a Minor)