



Responsibility Pledge and Release

Bikram Yoga Maui - HI

PRINT First and Last Name _____

ID number / Type _____

I understand that Bikram Yoga is an arduous hatha yoga practiced in a hot (105° F) and humid (50% humidity+) room for approximately 90 minutes. To maximize the health benefits and minimize the health risks of such practice, I am responsible for preparing for each Bikram Yoga class in which I participate.

I understand that vigorous physical exercise in a hot and humid room can cause dizziness, nausea, fainting, dehydration, heat exhaustion, heat stroke or hyponatremia (dangerously low sodium levels). I promise to prepare for each class by minimizing such risks: I will dress in light clothes; drink plenty of water; refrain from ingesting narcotics, drugs or alcohol; avoid big meals 2-3 hours before class; avoid class when fasting; and pause during class to sit or recline when my body tells me to do so. I understand that Bikram Yoga training is mental as well as physical, so I must participate with focus, always paying attention to classroom instruction and, above all, the dictates of my body.

Within the previous six months, I have seen a doctor who has evaluated my physical condition and has cleared me to practice Bikram Yoga. As I become aware of conditions that may compromise my safe practice of Bikram Yoga (including but not limited to pregnancy, heart disease, high or low blood pressure, asthma, broken bones, sprained muscles, and drug prescriptions contraindicated to heated environments), I promise to disclose such conditions to an instructor before taking a Bikram Yoga class.

I release Bikram Yoga Maui and its instructors from liability for injuries arising out of my yoga practice at its studios, arising out of my use of its facilities, or both.

Address _____ City _____ State _____ Zip _____

Phone (Circle one: Work Home Cell) _____ Email _____ Date of Birth _____

Signature _____ Date _____ Referred By _____ First Pass _____



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