

Vivekananda Vedanta Society of Chicago
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RELEASE AND WAIVER AGREEMENT

I _____ (print name) understand that as is the case with any physical activity, the risk of injury, even serious or disabling, is always present and cannot be entirely eliminated. I understand that it is my responsibility to inform the instructor of any physical limitations, disabilities, or conditions that may be aggravated by my participation in these activities. I hereby release the Vivekananda Vedanta Society of Chicago and the instructors of this program from any claim, demand, or cause of action of any kind resulting from, or related to my participation in the programs offered at the Society.

Signature (of parent or guardian in case of minor)

Date