



Hindu Swayamsevak Sangh U.S.A., Inc.

Individual Consent, Release, and Waiver Form

Please complete one form for each participant in Surya Namaskar Yajna.

Name _____

Street Address _____

Email Address _____

Home Phone _____ Other Phone _____

1. As the undersigned person, I hereby consent to my participation in the Surya Namaskar Yajna (the "Event") conducted by Hindu Swayamsevak Sangh U.S.A., Inc. ("HSS").
2. As the undersigned person, I hereby acknowledge that my participation in the Event will include participation in various yoga postures, and that participation in such activities may expose me to the risk of bodily injury. Accordingly, I hereby further acknowledge that I have consented to my participation in the Event having assumed the risk of bodily injury.
3. As the undersigned person, in the event that I suffer bodily injury while participating in the Event, I hereby authorize HSS and its officers, directors, representatives, agents, and volunteers present at the Event to authorize any emergency medical or surgical treatment deemed to be in my best interest if I am otherwise unable to do so. I hereby further agree to assume full responsibility for the payment of all fees and expenses incurred for any such emergency medical or surgical treatment so received by me. The following insurance policy or coverage is available to cover the cost of all fees and expenses incurred for any such emergency medical or surgical treatment so received by me:

Group Name _____ Group Number _____

Member Name _____ Member Number _____

4. As the undersigned person, I hereby agree to RELEASE, INDEMNIFY, AND HOLD HARMLESS HSS and its officers, directors, representatives, agents, and volunteers (the "Indemnified Parties") from all claims for damages or injunctive relief resulting from my participation in the Event, including any claim alleging that damages or injuries were caused by the NEGLIGENCE of any of the Indemnified Parties.

Signature _____

Date _____