



Yoga In The Park at Radisson Summer 2022

9:15-10:15am - Tuesday Morning - June 28 – Aug 2 (6 week series)

9:15-10:15am - Thursday Morning - June 30 – Aug 4 (6 week series)

\$54 for One Class Per Week **OR** \$100 for Two Classes Per Week

Class Description - Reset your mind, body and spirit with this gentle form of Hatha Yoga. Certified yoga teacher, Sybil Gouchie will guide us as we breathe, strengthen, stretch and connect with ourselves, and the beauty of nature all around us. This class is perfect for all levels including beginners. This is an adult class which allows mature children age 14+ with participating, parent or guardian. Park located at Drakes Landing & Glacier Ridge Road.

Rain plan - classes will move indoors at studio located at Willow Health & Wellness Center. Rain plan will be posted on the AM/PM Yoga Source website & FB page

- Minimum of 6 students/Maximum of 25
- Wear comfort clothing and bring a yoga mat
- Registration ends 4 days before class begins
- There are no cash refunds.

- Drop completed registration forms off at RCA office drop box
- Please call or text 315-480-4863 with questions
- All will receive a Pass for 1 FREE In Studio Class

Name \_\_\_\_\_ Amount Enclosed \$ \_\_\_\_\_ (Checks payable - Sybil Gouchie)

Address \_\_\_\_\_

Phone # \_\_\_\_\_

Email \_\_\_\_\_

**Please Circle** Tuesday Session Thursday Session Both Tues & Thurs Sessions Resident? YES or NO

Have you taken yoga in the past? YES or NO If yes, for how many years? \_\_\_\_\_

Do you have medical conditions or health concerns that you feel the teacher should know about? YES or NO

If yes please list: (some areas of concern—pregnancy, neck, or back injuries, joint problems (knee, hip, wrist, etc.) heart disease, high blood pressure, eye surgery, glaucoma, any recent surgery) Before practicing yoga, consult your doctor if these or other health concerns exist.

# AM/PM YOGA SOURCE

~yoga to revitalize & rejuvenate



## AM/PM Yoga Source Student Waiver Agreement

I \_\_\_\_\_ (print name) understand that yoga includes physical movements as well as an opportunity for relaxation, stress reduction and relief of muscular tension. As is the case with any physical activity, the risk of injury, even serious or disabling, is always present and cannot be entirely eliminated. If I experience any pain or discomfort, I will listen to my body, adjust the posture and ask for support from the teacher. I will continue to breathe smoothly.

Yoga is not a substitute for medical attention, examination, diagnosis or treatment. Yoga is not recommended and is not safe under certain medical conditions. I affirm that I alone am responsible to decide whether to practice yoga. I hereby agree to irrevocably release and waive any claims that I have now or hereafter may have against (Sybil Gouchie, AM/PM Yoga Source).

\_\_\_\_\_  
(signature of participant, parent or guardian)

\_\_\_\_\_  
(date)

\_\_\_\_\_  
(emergency contact name)

\_\_\_\_\_  
(relationship)

\_\_\_\_\_  
(phone #)



**RADISSON FIELD/COURT PARTICIPANT WAIVER**

NAME: \_\_\_\_\_

INSTRUCTOR'S NAME: Sybil Gouchie

GROUP ACTIVITY: Yoga

FIELD LOCATION: Drake's/Glacier Ridge

DATE: \_\_\_\_\_

**Waiver Agreement:** I agree to release and hold harmless the Radisson Community Association, Inc. ("RCA"), its employees, agents, representatives and any volunteers from any and all injury, claims, and liabilities whatsoever that might be incurred as a result of participation in said program. I further grant the RCA, its employees, agents, representatives and any volunteers or emergency personnel permission to provide me with emergency or medical treatment should that become necessary. I have read this document carefully, understand its terms, and voluntarily sign it understanding its significance.

**Public Health Disclosure:** I understand that the Radisson Fields/Courts are publicly used facilities and the Radisson Community Association cannot ensure this facility is free of COVID-19 or other infectious diseases. Use of this facility is at Members' own risk.

All organizations/individuals, using RCA's fields must comply with CDC, NYS and Onondaga County guidelines for COVID-19.

Name Printed \_\_\_\_\_

Signature \_\_\_\_\_