

# Teen Mat Pilates

## Permission Form for Under Age 18

I, parent/legal guardian \_\_\_\_\_, in full recognition and appreciation of the hazards and exposures involved do hereby voluntarily agree to assume all of the risks and responsibilities involving my/my child's participation in Zipi Greenwald's Teen Mat Pilates: and further, I do for myself, my heirs, and personal representative(s) hereby defend, hold harmless, indemnify and release and forever discharge Zipora Greenwald, AeobicsWoman and Soma Studio from and against any and all claims, demands, and actions, or causes of action of any sort on account of personal injury which may result from my/my child's participation in the Teen Mat Pilates class. I have read and executed this document with full knowledge of its significance.

Signed: \_\_\_\_\_

Relationship: \_\_\_\_\_

Participant: \_\_\_\_\_ Date: \_\_\_\_\_