

MEHyoga  
Morgan Elaine Henschke  
[morganhenschke@yahoo.com](mailto:morganhenschke@yahoo.com)  
603.997.1564  
Mehyoga.com  
King Yoga  
408 Aspen Airport Business Center, Aspen, Colorado 81611

The undersigned parent(s) or legal guardian(s) represents that I am the parent(s) or legal guardian(s) of \_\_\_\_\_ (hereinafter referred to as 'child').

In consideration of the above named child participating in 'MEHyoga Kid's Summer Camp' (hereinafter referred to as 'summer camp'). I hereby agree to the following terms and conditions of this agreement.

I understand that the summer camp involves a physical yoga practice that require my child to be in good physical health. On behalf of my child, I accept and clearly understand that there are inherent risks involved in participating in summer camp activities and programs. Injuries may occur during these activities, therefore I am voluntarily placing my child in this summer camp with full knowledge of the risks involved and, for myself and on behalf of my child freely assume and accept responsibility for all risks that may be associate with, or that may be a result of my child participating in summer camp activities.

I authorize Morgan Henschke to call for medical assistance for my child to be transported to a medical facility or hospital of, in Morgan Henschke's opinion such medical attention is needed for my child. I understand that a conscientious effort will be made to contact me before any such action is carried out. I further authorize appropriate medical personnel to render such medical treatment as is necessary for the health of my child., in their professional opinion. I agree that once my child is transported to the medical facility or hospital, Morgan Henschke shall have no further responsibility of my child. I agree to pay all costs associated with such medical care and transportation.,

I also hold Morgan Henschke, King Yoga, and Aaron King harmless in the event of any accident, injury, or death which might occur despite their best efforts to provide and maintain a safe environment for my child.

PARENT(S) INITIALS \_\_\_\_\_

I HAVE CAREFULLY READ, UNDERSTOOD AND VOLUNTARILY ACCEPT THE TERMS OF THIS WAIVER AND RELEASE AGREEMENT.

\_\_\_\_\_  
Parent's Printed Name

\_\_\_\_\_  
Parent's Printed Name

\_\_\_\_\_  
Parent's Signature

\_\_\_\_\_  
Parent's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date