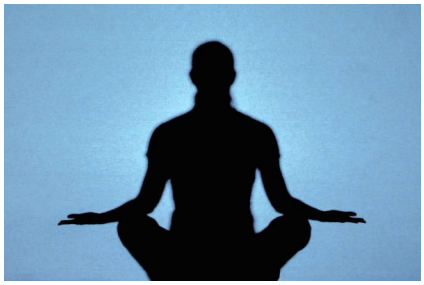

Burrillville

Parks & Recreation

YOGA

Name:	
Address:	
Home Phone: E-mail Address:	Emergency Name/Phone: Allergies:
Registration Fee: $48 per person, per 6 classes or $10 walk-in fee Payable to: *Anita Bevans* *578 Wallum Lake Raod* *Pascoag, RI 02859* Phone: 401-578-4162 E-mail: intlstamp@aol.com	Class location: Burrillville Community Recreation Center (Beckwith Bruckshaw Lodge) *Thursdays 6:30 p.m. to 7:30 p.m.*

WAIVER

I, the undersigned for ourselves, our heirs, executors, and administrators, waive, release, and hold harmless the Town of Burrillville and/or Anita Bevans, its staff, officers, agents, employees, representatives, successors, and assign of and from all rights/claims for damages, loss to person or property, which may be sustained or occur before, during or after participation in the yoga program or anywhere on the demise premises, including the parking lot, which are caused by willful, wrongful act, negligence, or default of the lessee, its agents and servants.

_____
Signature (parent or guardian if under age 18)

_____
Instructor Signature

_____
Date: