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The Aquarian Teacher™ KRI™ Level One Liability Release Form

Name of Licensee / Program Number / Location:

Registrant's Legal Name:

Registrant's Spiritual Name (optional):

Mailing Address:

City, State, Country:

Postal Code/Zip Code:

Date of Birth:

Phone:

E-mail:

Release, Waiver, and Indemnity

I am aware that the Kundalini Yoga as taught by Yogi Bhan® Teacher Training Program in which I am hereby registering (the "Program") exists to serve me by sharing knowledge of Kundalini Yoga and health. I recognize that yoga is physically and mentally challenging and may cause physical injury and intense psychological or emotional experiences and side effects. I am fully aware of and assume the risks and hazards involved. I understand that it is my responsibility to consult with my healthcare providers prior to my participation in the Program regarding any specific medical, emotional, or psychological issues or concerns. I acknowledge that I am fully responsible for my self-care both during and after participating in the Program. I represent and warrant that I am physically fit, and I have no physical, mental, or psychological condition or illness that would prevent my full participation in the Program or increase my risks of negative mental or physical health outcomes.

In consideration of being permitted to participate in the Program, I agree to assume full responsibility for any risks, injuries or damages, known or unknown, which I might incur as a result of participating in the Program. I freely and voluntarily choose to participate in the program.

I hereby agree to indemnify and hold harmless the Program; Kundalini Research Institute; YB Teachings, LLC; 3HO Foundation International; Sikh Dharma International; Humanology & Health Science, Inc.; Siri Singh Sahib Corporation; their affiliates, subsidiaries, and related entities; and their officers, directors, employees, agents, or volunteers (collectively, the "Indemnified Parties") from and against all lawsuits, claims, actions, demands, proceedings, liabilities, damages, judgments, settlements, costs, and expenses, including reasonable attorney's fees, now or hereafter known or arising in any jurisdiction in the world, attributable or relating in any manner to my participation in the Program.

I understand that this means that I will not hold the Indemnified Parties responsible for any injury, losses, or damages I suffer due to my participation in the Program, attributable or relating in any manner to my participation in the Program. Because of the Program being licensed by the Kundalini Research Institute (KRI), and KRI's relationships with various other Kundalini Yoga-related organizations, I also agree to hold harmless the above listed related organizations and people.

I hereby acknowledge that I have read, fully understand, and agree to each of the foregoing provisions of this agreement. I understand that I have given up substantial rights by signing this agreement. I enter into this agreement freely and voluntarily. I declare that my registration information provided above is true and correct.

By typing my name below, I am electronically signing this form and agree with the above.

Signature (Legal Name):_____ Date:_____

Note: This document is for general use in the ATA and is **NOT open for EDITS**. To fill it in with your personal information you can **DOWNLOAD IT** to use in Microsoft Word or **MAKE A COPY** to use in your Google Drive. [Find HERE](#) a short video about this process.